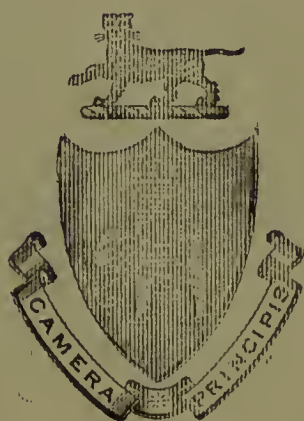


CITY OF COVENTRY.



# Annual Report

ON THE

HEALTH OF THE CITY

BY THE

MEDICAL OFFICER OF HEALTH

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1929.

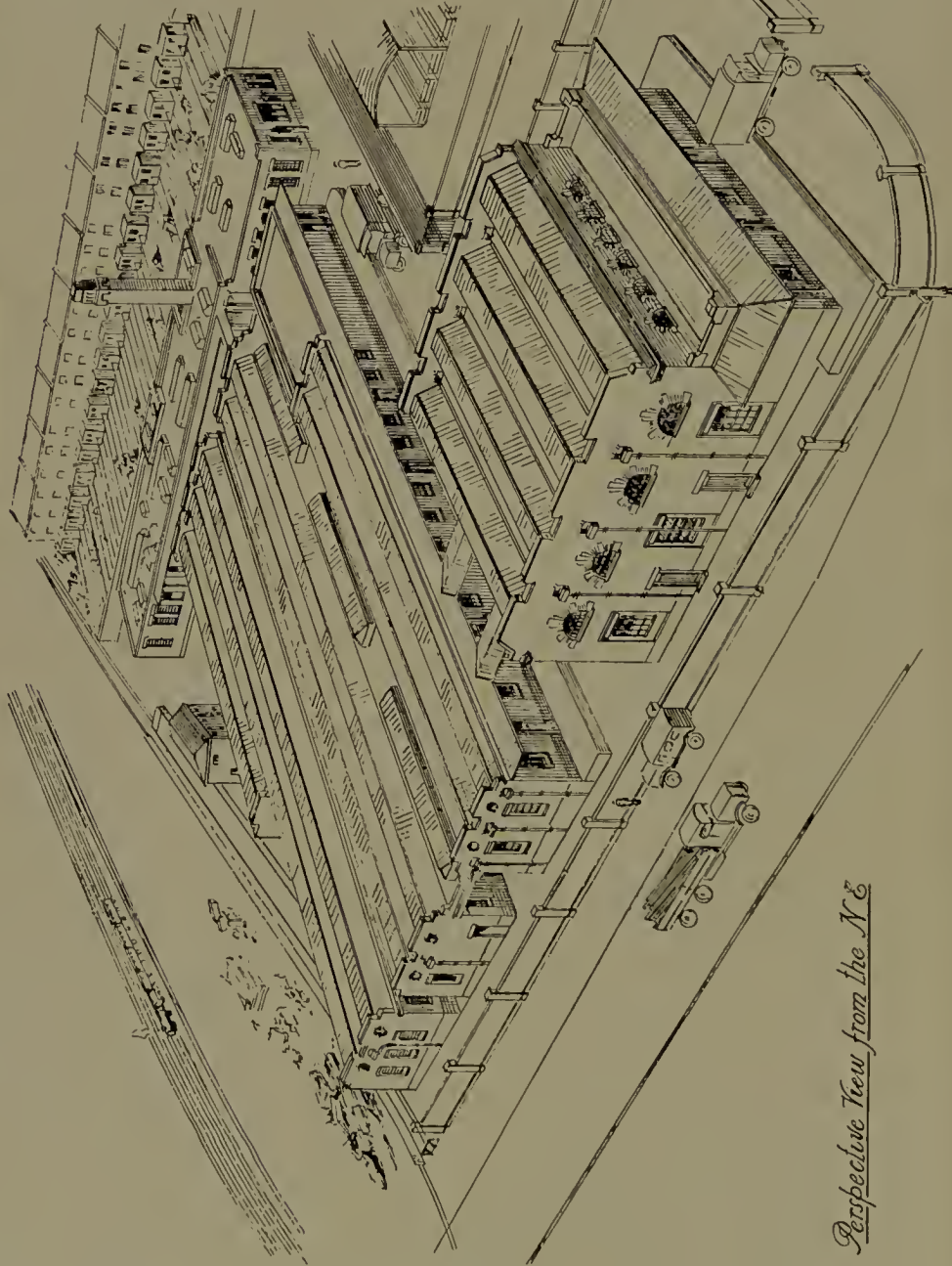
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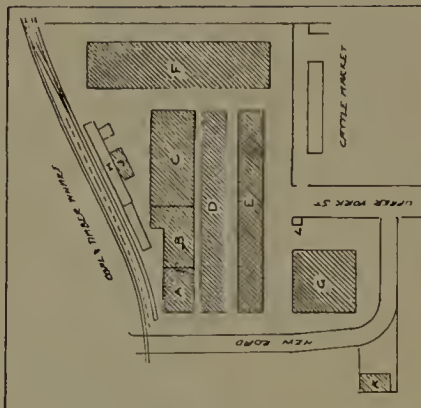




# CITY OF COVENTRY NEW ABATTOIR & MEAT MARKET



*Perspective View from the N.E.*



*SKETCH PLAN*

NOTES: (A) PIG LAIRS (B) SHEEP LAIRS (C) CATTLE LAIRS  
(D) HORSE LAIRS (E) BOWLING MILL & CHILL ROOM  
(F) BEEF MEAT ROOM (G) BEEF MEAT ROOM  
(H) SCHOOL BOILER ROOM (I) MEAT MARKET  
(J) MEAT MARKET & COLD STORAGE  
(K) DISSEMBLING STAGE (L) FORGE STONE (M) CHECK OFFICE

*Edaphos Pyling F.R.S.  
Architect  
53 Victoria Street Westminster 1711*



CITY OF COVENTRY.



## The Health of the City in 1929

---

# Annual Report

.. BY ..

A. MASSEY, M.D., D.P.H.

*Medical Officer of Health,  
School Medical Officer,  
General Superintendent Corporation Hospitals.*

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Coventry :

CURTIS AND BEAMISH, LTD., PRINTERS, HERTFORD STREET.

## PUBLIC HEALTH COMMITTEE (AND MATERNITY AND CHILD WELFARE COMMITTEE).

---

MR. COUNCILLOR T. E. FRISWELL, *Chairman.* (a) (b) (c) (d)  
 MISS COUNCILLOR A. ARNOLD, *Vice-Chairman.* (a) (b) (c) (d)  
 THE MAYOR (MR. ALDERMAN F. LEE, J.P.) (a)  
 THE DEPUTY MAYOR (MR. ALDERMAN F. SNAPE, J.P.)  
 MR. ALDERMAN T. A. B. SODEN, J.P., M.R.C.S. (a) (b) (d)  
 MR. COUNCILLOR A. T. ADAMS. (b) (d)  
 MR. COUNCILLOR H. S. ARMISHAW. (b)  
 MR. COUNCILLOR J. C. LEE GORDON. (a)  
 MRS. COUNCILLOR S. A. GRIFFITHS, J.P., M.B.E. (b)  
 MR. COUNCILLOR T. HANCOX. (a)  
 MR. COUNCILLOR J. R. HOLBROOK. (c) (d)  
 MRS. COUNCILLOR E. HUGHES. (b) (d)

Membership of the various Sub-Committees of the Public Health Committee is shown by the following marks:—

- (a) Abattoir Sub-Committee
- (b) Hospitals Sub-Committee
- (c) Offensive Trades Sub-Committee.
- (d) Unfit Houses Sub-Committee.

---

## MENTAL DEFICIENCY ACT COMMITTEE.

MRS. COUNCILLOR S. A. GRIFFITHS, M.B.E., J.P., *Chairman.*  
 MRS. COUNCILLOR E. THOMSON, *Vice-Chairman.*  
 MR. ALDERMAN W. H. BATCHELOR.  
 MISS COUNCILLOR A. ARNOLD.  
 MR. COUNCILLOR C. MCGOWRAN.  
 MR. COUNCILLOR C. PAYNE.  
 MRS. J. CANT, J.P.

---

## REPRESENTATIVES ON THE WARWICK- SHIRE AND COVENTRY JOINT COMMITTEE FOR TUBERCULOSIS.

---

THE MAYOR (MR. ALDERMAN F. LEE, J.P.)  
 MR. ALDERMAN SODEN, J.P., M.R.C.S. (*Vice-Chairman of  
Joint Committee*).  
 MISS COUNCILLOR A. ARNOLD.  
 MR. COUNCILLOR H. H. CHESHIRE.  
 MR. COUNCILLOR O. M. FLINN.  
 MR. COUNCILLOR T. E. FRISWELL.  
 MR. COUNCILLOR LEE GORDON  
 MRS. COUNCILLOR E. HUGHES.  
 MR. COUNCILLOR W. H. MALCOLM.  
 MR. COUNCILLOR A. G. SAGE.  
 MR. COUNCILLOR A. TURNER.

# SMOKE ABATEMENT ADVISORY COUNCIL FOR THE MIDLANDS.

MR. COUNCILLOR T. E. FRISWELL.

## REPRESENTATIVES ON THE GENERAL COMMITTEE OF THE COVENTRY AND WARWICKSHIRE HOSPITAL.

MR. ALDERMAN T. A. B. SODEN, J.P., M.R.C.S.

MR. COUNCILLOR T. E. FRISWELL.

MRS. COUNCILLOR HUGHES.

## PUBLIC HEALTH STAFF.

Medical Officer of Health -	E. H. SNELL, M.D., D.P.H. ( <i>Retired 31st Jan., 1930; succeeded 1st Feb., 1930 by</i> A. MASSEY, M.D., D.P.H.)
Deputy do. do. -	<sup>1</sup> A. J. B. GRIFFIN, M.B., CH.B., D.P.H.
Tuberculosis Officer -	J. MCG. WILLIAMS, M.D., D.P.H.
Asst. Tuberculosis Officers	{ R. J. CYRIAX, M.D. BRUX., D.P.H. A. OGG, M.A., M.B., D.P.H.
Medical Supt. (Memorial Sanatorium) -	F. R. G. HEAF, B.A., M.D.
Asst. Medical Officers do.	{ W. A. SCOTT, B.SC., M.D., D.P.H. R. J. VINCE, B.A., M.R.C.S., L.R.C.P.
Public Analysts -	{ A. BOSTOCK HILL, M.D., D.P.H. } Part W. T. RIGBY, F.I.C. } time.
Veterinary Inspector -	WILLIAM DALE, M.R.C.V.S. (Part time).
Chief Sanitary Inspector -	W. R. MARTIN.*
Deputy Chief Inspector -	W. BEAUMONT.*
Sanitary Inspectors -	{ Miss P. CHURCHILL.* T. F. ROBERTS.*
Assistant Inspectors -	{ T. E. WILLMOTT.*    (Resigned 4th H. ELLIS.x Jan., 1930). H. LENTON.x A. C. SAWORD.x    E. JOHNSON.x    J. RANDALL.x

## PUBLIC HEALTH STAFF—continued.

Probationer Inspector	-	V. CROFT.
Supt. Health Visitor	-	Miss L. CURETON. § ¶ *
Dept. Supt. Health Visitor	-	Miss R. WARD. § ¶ *
Health Visitors	-	Miss A. G. PUDGE. † §
		Miss E. R. SAUL.* § a
		Miss G. A. SAUL, B.A., Lond. † §
		Mrs. F. A. GEORGE. ¶ §
		Miss M. CONLON. ¶ § c (Resigned 11th April, 1929).
		Miss H. FORSTER. ¶ § c
		Miss E. BOULTON. §
Tuberculosis Visitor (Jointly for Coventry and War- wickshire)	-	Miss G. O. MASKELL. ¶ §
		Miss A. J. RINGROSE. ¶ §
Statistical Clerk	-	J. H. GRANT. †
Senior Clerk	-	W. STORER.
Junior Clerks	-	Miss G. HARVEY.
		Miss D. JOHNSON.
		Miss E. W. ROGERS. (Resigned 24th August, 1929).
		Miss W. M. BROWN.
		Miss D. FREARSON.
		Miss E. BRICKNELL.
Disinfector and Ambulance Driver	-	R. W. ELMORE.

<sup>1</sup> Resigned 16th February, 1930; succeeded 10th April, 1930 by H. L. Oldershaw, M.B., B.S., D.P.H.

\* Inspector's Certificate of Royal Sanitary Institute.

† Inspector's Certificate of Sanitary Inspectors' Examination Board.

¶ Certificate of Royal Sanitary Institute for Inspecting Meat and other foods.

α Certificate of Royal Sanitary Institute and Sanitary Inspectors Joint Examination Board.

† Health Visitor's Certificate of Royal Sanitary Institute.

§ Certificate of Central Midwives Board.

¶ Three years general trained nurse.

a Certificate of Royal Sanitary Institute for Maternity and Child Welfare Workers.

b Certificate under the Board of Education (Health Visitors Training) Regulations, 1919.

c New certificate of Royal Sanitary Institute for Health Visitors under Memo 101/M.C.W.

## CITY AND PINLEY ISOLATION HOSPITALS.

Medical Superintendent	-	A. MASSEY, M.D.
Matron	-	MISS A. M. LESLIE.

For School Medical Staff see page 138.

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### General Statistics.

Area in acres	...	...	...	...	12,878
Population (Census, 1921)	...	...	...	...	128,157
Population (estimated, 1929)	...	...	...	...	172,000
Density of population (1929) per acre	...	...	...	...	13·3
Number of inhabited houses (1921)	28,355	...	(Dec., 1929)	39,374	
Average number of persons to each occupied house (mid. year)	4·3				
Rateable Value of City (Dec., 1929)	...	...	...	£931,368	
Sum represented by a penny rate (Dec., 1929)	...	...	...	£3,732	

### Summary of Vital Statistics.

The principal features of the vital statistics for the year are as follows :—

Estimated Population, 1929	...	...	...	172,000
Birth Rate	...	...	...	14·2
Marriage Rate	...	...	...	17·2
Recorded Death Rate	...	...	...	11·5
Infantile Death Rate per 1,000 Births	...	...	...	73·1
Death Rate from principal Infectious Diseases	...	...	...	0·63
Respiratory Death Rate	...	...	...	2·16
Phthisis Death Rate	...	...	...	0·91
Death Rate from other forms of Tuberculosis	...	...	...	0·11
Death Rate from Cancer	...	...	...	1·23

# CITY OF COVENTRY.

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## Fifty-fifth Annual Report

OF THE

## MEDICAL OFFICER OF HEALTH.

---

To the Right Worshipful the Mayor, Aldermen  
and Councillors of the City of Coventry.

MR. MAYOR, LADIES AND GENTLEMEN,

*In submitting to you the fifty-fifth Annual Report—that for 1929—on the health of the City, I would explain that, although the privilege and pleasure of so doing fall to my lot, I took no hand in the actual work of the Department during the period under review, for my appointment as your Medical Officer of Health dates only from February 1st of the current year, 1930. On the latter date I took over from my esteemed predecessor, Dr. Snell (on his retirement), the Department which he had conducted, shaped and developed for well over thirty years. On this I need say no more than that I inherited a great legacy.*

*The vital statistics for the year present notable features. The birth rate, 14.2 per 1,000 population, is lower than that of any preceding year (14.4 in 1928), and compares with a rate of 16.3 for England and Wales. The progressively falling birth rate is a matter for national and local concern, mitigated, however, by the hope that more limited families will enable the bestowal of more care on each member of them. The death rate, 11.5 per 1,000 population, shows a sharp rise as compared with*

the figure of 9.6 for 1928, and is the highest since 1918, in which year the City death rate was 14.5. In 1929, as in 1918, influenza was largely responsible for the increase. The 1929 death rate for England and Wales showed a similar increase to 13.4 as against 11.0 in 1928. It will be noted that the Coventry death rate is considerably lower than that for the country as a whole. A marked rise in the infant mortality rate for 1929 is also to be recorded—73 per 1,000 births, compared with 65.7 in 1928. The 1929 figure for England and Wales is 74. The rise is due largely to the increased toll of young life taken by the respiratory diseases consequent upon the influenza epidemic and the exceptional rigours of the 1929 portion of the 1928-29 winter.

A wave of influenza swept the country during the first quarter of 1929, and Coventry had its meed of morbidity and mortality therefrom, though apparently not to the same extent as certain other of the great towns.

Of the other infectious diseases, diphtheria continues to be a disquieting feature. No less than 431 cases were notified in the City during the year, of which 37 proved fatal. The mortality, however, shows a decline as compared with that of the previous year. Nevertheless, both incidence and mortality appear high. This is perhaps not unconnected with the present inadequacy of isolation hospital accommodation, and I welcome the progress, at the time of writing, of the project for a new and larger hospital.

The activities of the Maternity and Child Welfare Service proceeded normally during the year. These constitute the very basis of a useful public health scheme. There is need for expansion of this work, and to this end partnership between Municipal and Voluntary agencies is indispensable. There have been notable events in this connexion during the current year, which will be recorded in my next Report.

The housing problem here, as in most big centres, stands largely unsolved. The rapid growth of population in the City has rendered the housing position peculiarly difficult. There are not a few properties ripe for closure, but how to re-house the displaced has hitherto remained a question unanswered. Meanwhile, reconditioning work goes on, but possibly more could be done in this direction with a staff of sanitary inspectors more adequate numerically.

*The scheme for a Public Abattoir, to which reference was made in last year's Report, is being pressed forward with all expedition. Its materialization will enable a thoroughness of meat inspection impossible of attainment in the case of private slaughterhouses geographically scattered.*

*At the time of writing, the appointed day on which the Local Government Act, 1929, came into operation, has duly passed and the public medical services of the City have been welded into one instrument. The appropriation, for the purposes of the Public Health and Maternity and Child Welfare Acts, of the Gulson Road Hospital (formerly the Poor Law now the Municipal Hospital) is the most notable of the important events in this connexion, which I hope to chronicle in full a year hence.*

*I am, Mr. Mayor, Ladies and Gentlemen,*

*Your obedient Servant,*

*ARTHUR MASSEY,*

*Medical Officer of Health.*

*The Council House,  
Coventry.*

*31st May, 1930.*





Natural and Social Conditions

---

Vital Statistics

## NATURAL AND SOCIAL CONDITIONS.

In many ways Coventry is a remarkable City. It is fortunate in that within its precincts are housed, on a large and growing scale, those industries which the trend of modern life has brought into particular prominence. In this category, motor vehicle and airplane manufacture and the artificial silk and electrical industries naturally range themselves. When to these are added general engineering, machine-tool making, printing and watch manufacture, a broad idea is presented of the chief occupations of the town. Situated in the middle of England, and possessed of many natural advantages, it is not surprising that Coventry proves magnetic to industry.

Cheek by jowl with modern industrialism in the City, are gems of artistic and architectural antiquity which draw visitors from far and near. Ancient and modern exist together without undue incongruity, and the combination makes Coventry a congenial city abounding in life and interest.

The town is surrounded on all sides by open country, and more immediately by a ring of fine commons. It is traversed from west to east by the insignificant river Sherbourne.

Lest the foregoing remarks be over-generous, one must hasten to add that Coventry is not innocent of black spots in the way of decadent house property, and more notably in the shape of those colonies of wooden dwellings in the northern sector of the town, which stand to-day a monument to the exigencies of war-time.

The average standard of life in the City can be described as good, and doubtless compares favourably with that of the great towns in general.

### Area.

The City to-day covers an area of 12,878 acres. Boundary extensions took place in 1890 (1,486 to 3,093 acres), 1899 (3,093 to 4,147 acres), and 1928 (4,147 to 12,878 acres).

### Population.

The population at the last census in 1921 was 128,157. The Registrar-General's estimate of population for mid 1928 was 161,100. The estimated population for mid 1929 is 172,000. It

is evident that the population has increased rapidly of recent years, and indications are not wanting that this increase is likely to continue. It is clear that the increase has little relationship to "natural increase," but rather is due to immigration. The day population must be considerably in advance of the last-named figure, for, owing largely to the housing shortage, numbers of workers employed in the City reside without the boundary.

The distribution of population in wards is shown in the table to be found on page 16.

### **Rateable Value.**

The rateable value of the City as at December, 1929, was £931,368, and the sum represented by a penny rate was calculated to be £3,732.

### **Meteorology.**

Observations are made daily at the meteorological station situate in the City Hospital grounds. The readings are posted each day at St. Mary's Hall. Monthly records are forwarded to the Meteorological Department of the Air Ministry and are included in the monthly weather reports by that Office.

A complete summary of the meteorological observations for the twelve months of 1929 is given on page 14.

Careful perusal of the chart opposite page 14 will repay the reader. It well illustrates the relationship which exists between the death rate and certain climatic conditions.

The highest temperature readings recorded during the year were :—In the shade, 86° on July 16th; one foot below the ground surface, 65.6° on July 22nd; and four feet below the surface, 58° on September 13th to 18th.

Freezing point or below was recorded on 72 days during the year, thus :—January, 20; February, 19; March, 15; April, 3; October, 1; November, 8; December, 6.

The warmest day of the year was July 16th, and the coldest February 15th.

The total rainfall registered was 25.45 inches, as compared with 26.92 inches during 1928.

According to the Campbell-Stokes recording instrument, there were 1488.7 hours of bright sunshine during the year.

# Meteorological Observations made at the City Hospital, Coventry, 1929.

Lat.  $52^{\circ} 24' 34''$

Long.  $1^{\circ} 30' 20''$

Height of

Height of rim of rain gauge above mea

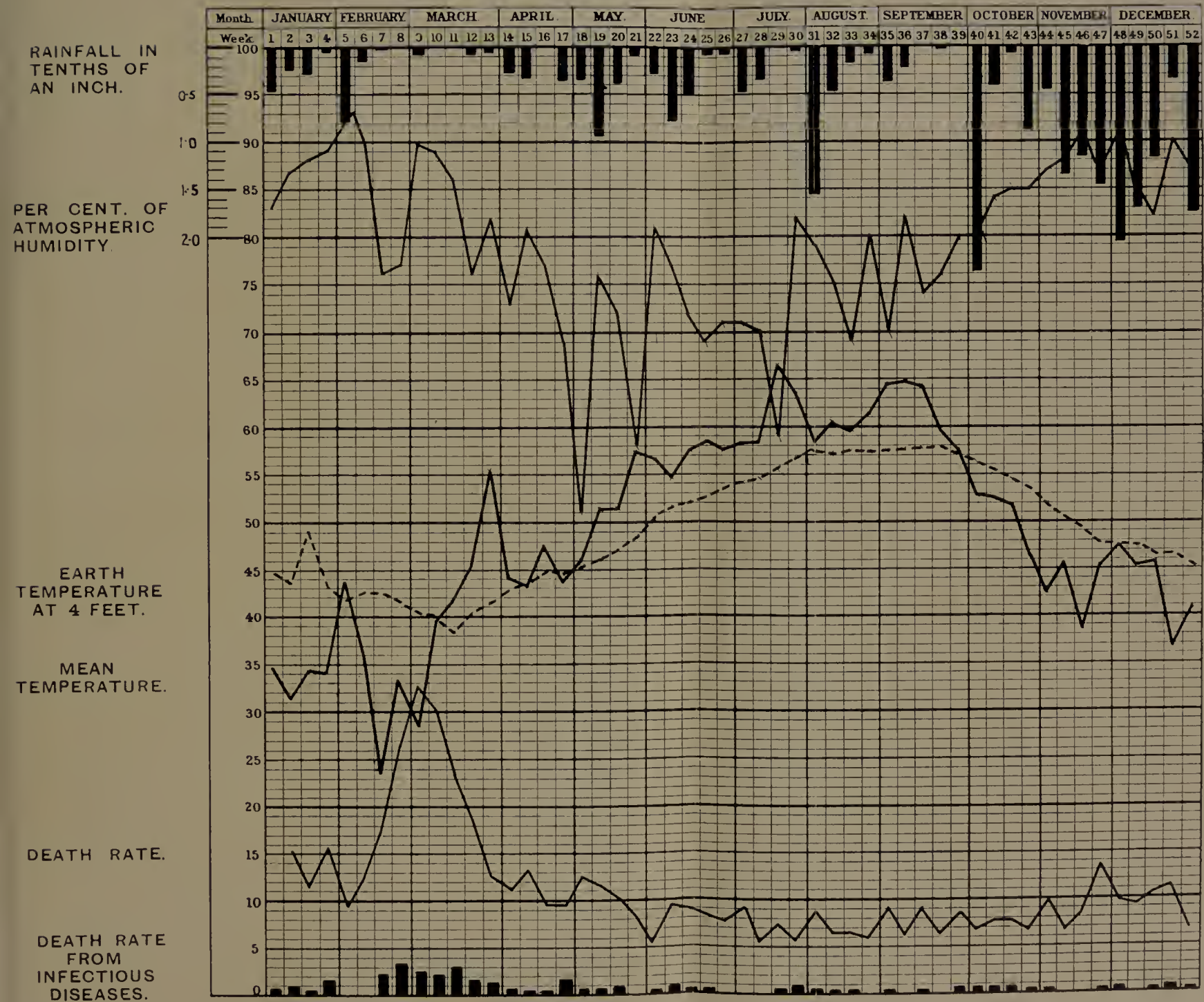
Height of rim of rain gauge above mean Sea Level 271ft.

The cistern of the barometer is situated 326 feet above sea level.

[illegible]



CHART ILLUSTRATING THE RELATION BETWEEN THE DEATH RATES  
AND PRINCIPAL METEOROLOGICAL CONDITIONS.







## **VITAL STATISTICS.**

### **Comparative Statistics of the Wards.**

The table below sets out the principal vital statistics for the year in respect of each of the fifteen wards in the City. It was only on April 1st, 1928, that a radical re-arrangement (occasioned by the boundary extension) brought into existence fifteen wards instead of the previous twelve. It is not possible therefore to give comparative figures appertaining to the wards as they stand, for years prior to the one under review.

WARDS.	Estimated population at middle of 1929.	Acreage.	Houses completed 1 Jan.—30 Dec., 1929.	Houses demolished 1 Jan.—30 Dec., 1929.	No. of Deaths Registered.	Death Rate, 1929.	No. of Births Registered.	Birth Rate, 1929.	No. of Deaths under 1 year of age.	Infantile Death Rate.
ALL SAINTS ..	12,657	151	..	..	182	14.4	143	11.3	13	90.9
BABLAKE ..	12,843	824	321	1	118	9.1	272	21.1	13	110.1
CHEYLESMORE ..	11,447	947	37	4	119	10.4	134	11.7	6	44.7
EARLSDON ..	10,357	1,814	231	1	114	11.0	106	10.2	6	56.6
FOLESHILL ..	10,671	271	96	..	109	10.2	133	12.4	10	75.2
GREY FRIARS ..	12,235	607	..	1	179	14.6	174	14.2	9	57.4
HARNALL ..	12,194	213	35	..	159	13.0	188	15.4	11	58.5
HILL FIELDS ..	12,596	149	58	..	150	11.9	166	12.3	11	70.5
LONGFORD ..	10,281	1,033	92	2	111	10.8	193	18.7	8	41.4
RADFORD ..	8,443	1,202	323	23	113	13.3	213	25.2	21	98.5
ST. MARY'S ..	11,600	252	2	54	215	18.5	183	15.7	19	103.0
ST. PAUL'S ..	11,749	389	31	..	132	11.2	131	11.1	15	114.0
UPPER STOKE ..	12,228	329	20	4	105	8.5	178	14.5	19	106.7
LOWER STOKE ..	12,844	940	108	..	104	8.1	171	13.3	9	52.6
WESTWOOD ..	9,855	3,756	210	1	82	8.3	131	13.2	8	61.0

TABLE I.—VITAL STATISTICS OF CITY DURING 1929 AND PREVIOUS YEARS.

Y EAR.	Population estimated to middle of each year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE CITY.		TRANSFERABLE DEATHS.†		NETT DEATHS BELONGING TO THE CITY.				
		Un- corrected Number.	Nett.		Number.*	Rate.	of Non- residents registered in the City.†	of Resi- dents not registered in the City.‡	Under 1 Year of Age.		At all Ages.	
			Number.†	Rate.					Number.*	Rate per 1,000 Nett Births		
1	2	3	4	5	6	7	8	9	10	11	12	13
1925	133,500	2222	2178	16·3	1455	10·9	107	69	168	77·1	1417	10·6
1926	135,000	2205	2116	15·7	1362	10·0	108	59	146	68·9	1313	9·7
1927	139,000	2147	2065	14·8	1442	10·4	107	83	131	63·4	1418	10·2
1928	168,134*	2388	2327	14·4	1565	9·6	80	81	153	65·7	1566	9·6
1929	172,000	2497	2434	14·2	2008	11·6	106	90	178	73·1	1992	11·5

Area of District in acres (land and inland water) 4,147.  
(After boundary extension 12,878).

Total population at all ages .. 128,157  
Total families or separate occupiers 30,324

At Census of 1921.

\* For statistical purposes a population of 161,600 was used.

## Marriages.

The number of marriages was 1,485, giving a marriage rate of 17.2, compared with 16.7 as the average for the previous ten years.

The following table gives a comparison with the figures of previous years, and with those of the country as a whole :—

Year.	No. of Marriages.	Rate.	Rate for England and Wales.
1910	886	17.4	14.8
1911	938	17.4	15.2
1912	959	17.2	15.5
1913	1026	17.8	15.5
1914	1091	18.2	15.9
1915	1282	20.8	19.3
1916	1184	18.6	15.4
1917	1155	17.7	13.8
1918	1237	18.6	15.3
1919	1236	18.1	19.7
1920	1342	19.1	20.1
1921	1047	16.3	16.9
1922	948	14.7	15.8
1923	995	15.2	15.2
1924	1159	17.5	15.3
1925	1173	17.5	15.2
1926	1103	16.3	14.3
1927	1124	16.2	15.7
1928	1336	16.5	15.3
1929	1485	17.2	15.8

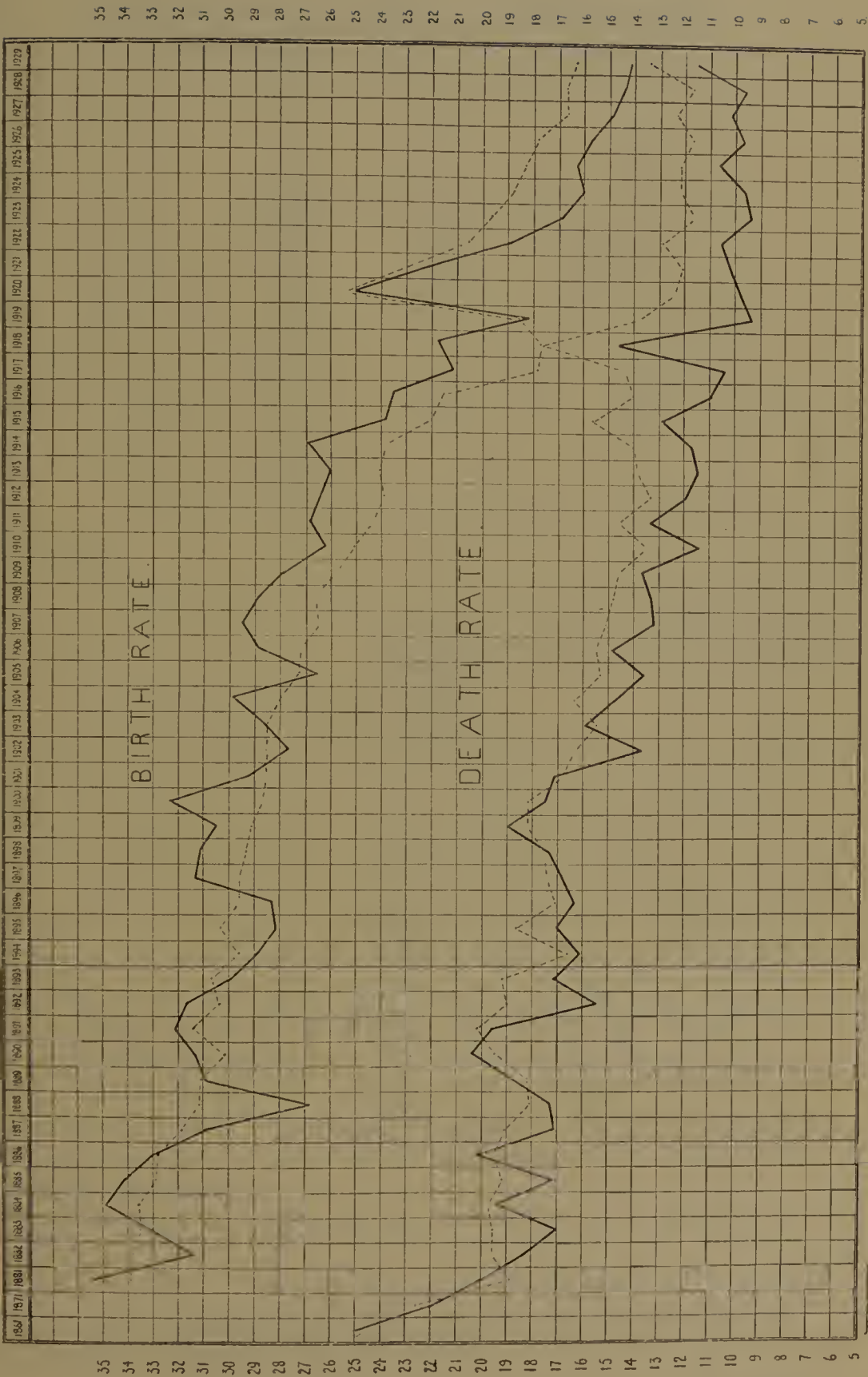
## Births.

There were 2,497 births registered during the year in the City; 96 of these were transferred out, while 33 occurring elsewhere were transferred in; this leaves a nett City figure of 2,434.

The birth rate for the year was 14.2 per 1,000 of the estimated population—as compared with 14.4 in 1928 and an average rate of 17.6 for the past ten years. There were 80 illegitimate births registered, or 3.28 per cent. of the total. In 1928 the percentage was 3.3, and in 1927, 4.1.

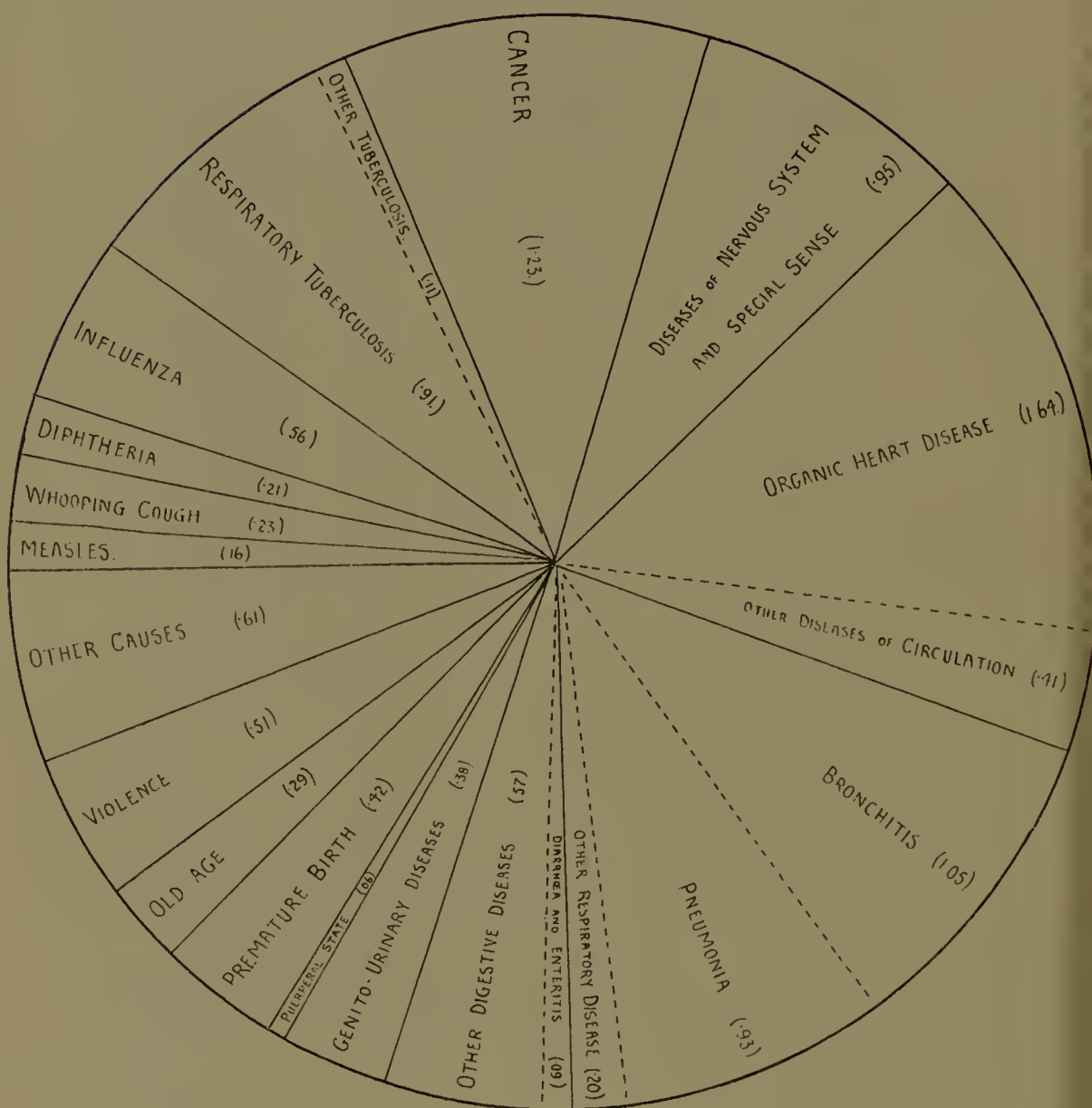
The Coventry birth rate is compared with that for England and Wales in the next table. From the latter it will be observed that prior to and during the war, the City rate consistently exceeded that of the Country (during the war this is quite understandable in an engineering and munition centre), but that a reverse state of affairs has obtained since.





Decennial Average      The black lines represent the rates for Coventry.      The dotted lines represent the rates for England and Wales.

PROPORTIONS OF DEATHS FROM PRINCIPAL  
CAUSES TO TOTAL DEATHS, 1929.



THE TOTAL DEATH RATE FROM ALL CAUSES WAS 11.5.

Year.	No. of Births.	Birth Rate.	Rate for England and Wales.
1910	2674	26.2	24.8
1911	2886	26.9	24.4
1912	2943	26.4	23.8
1913	2999	26.0	23.9
1914	3203	26.9	23.8
1915	2936	23.8	21.8
1916	2993	23.5	21.6
1917	2635	20.2	17.7
1918	2766	20.7	17.7
1919	2486	18.2	18.5
1920	3250	23.2	25.4
1921	2836	22.1	22.4
1922	2442	18.9	20.6
1923	2217	16.9	19.7
1924	2113	16.0	18.8
1925	2178	16.3	18.3
1926	2116	15.7	17.8
1927	2065	14.8	16.7
1928	2327	14.4	16.7
1929	2134	14.2	16.3

### Deaths.

There were 2,008 deaths registered during the year in the City; of these, 106 were deaths of non-residents—these have been referred to the districts in which the deceased had ordinarily resided; there were also 90 deaths of Coventry persons which occurred elsewhere. The nett number of deaths was therefore 1,992. On this latter figure, the recorded death rate was 11.5 per 1,000 population (as against 9.6 in 1928). Of the 1,992 deaths, 767 occurred during the first quarter, when mortality from influenza and other respiratory diseases was high.

The death rate for the 107 great towns (including London) was 13.7; for the 157 smaller towns it was 12.3, and for London 13.8. The rate for England and Wales was 13.4 (as compared with 11.7 in 1928). All the figures show an unfortunate increase on those for 1928. The Coventry rate is considerably lower than that for the great towns or the Country generally.

As is usually the case, heart disease was the cause of the greatest number of deaths (294). This condition is frequently the fatal issue to which earlier affections, notably rheumatism, have subscribed.

Cancer was responsible for 213 deaths, and tuberculosis for 177.

A striking feature was the abnormally large toll of life taken by certain respiratory diseases, viz., bronchitis, pneumonia and influenza. (See table on page 30).

The average age at death of those who died during the year was 48. This compares with a mean age of 35 years a quarter of a century ago.

TABLE III.—CAUSES OF, AND AGES AT DEATH DURING YEAR 1929.

CAUSES OF DEATH.		Nett Deaths at the subjoined ages of "Residents" whether occurring within or without the City.									Total Deaths whether of "Residents" or "Non-Residents" in Institutions in the City.	Registrar's General's Figures.
		All ages.	Under 1 year.	1 and under 2.	2 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and upwards.		
1		2	3	4	5	6	7	8	9	10	11	12
All causes	Certified .. .. .	1988	177	71	63	79	98	233	522	746	759	1991
	Uncertified .. .. .	4	1	..	..	..	..	..	1	2		
1.	Enteric Fever .. .. .	2	..	..	..	..	..	2	..	..	2	1
2.	Small Pox .. .. .	..	..	..	..	..	..	..	..	..	..	..
3.	Measles .. .. .	29	3	9	14	3	..	..	..	..	7	33
4.	Scarlet Fever .. .. .	1	..	..	..	..	1	..	..	..	1	1
5.	Whooping Cough .. .. .	40	12	17	9	2	..	..	..	..	7	39
6.	Diphtheria .. .. .	37	2	2	10	23	..	..	..	..	25	38
7.	Influenza .. .. .	97	3	1	3	4	9	14	28	35	18	103
8.	Encephalitis Lethargica .. .. .	4	..	..	1	..	1	1	1	..	3	4
9.	Meningococcal Meningitis .. .. .	1	..	..	..	..	1	..	..	..	..	1
10.	Tuberculosis of respiratory system .. .. .	158	1	..	..	2	33	63	56	3	49	161
11.	Other Tuberculous Diseases .. .. .	19	..	1	4	4	5	3	2	..	6	18
12.	Cancer, malignant disease .. .. .	213	..	..	..	..	3	11	103	96	84	219
13.	Rheumatic Fever .. .. .	13	..	..	..	4	1	3	5	..	5	7
14.	Diabetes .. .. .	17	..	..	..	..	1	1	8	7	2	18
15.	Cerebral Hæmorrhage, etc. .. .. .	79	1	..	..	..	..	3	33	42	37	80
16.	Heart Disease .. .. .	294	..	..	..	1	2	15	64	212	145	405
17.	Arterio-Sclerosis .. .. .	48	..	..	..	..	..	1	13	34	6	40
18.	Bronchitis .. .. .	181	7	2	1	..	2	5	40	124	31	100
19.	Pneumonia (all forms) .. .. .	160	32	28	12	9	4	20	24	31	31	154
20.	Other Respiratory diseases .. .. .	31	2	..	..	1	1	5	8	14	10	24
21.	Ulcer of Stomach or Duodenum .. .. .	11	..	..	..	..	..	2	8	1	13	14
22.	Diarrhœa, etc. .. .. .	17	10	..	..	1	..	1	1	4	2	18
23.	Appendicitis .. .. .	23	..	..	..	7	1	6	7	2	26	19
24.	Cirrhosis of Liver .. .. .	11	..	..	..	..	..	2	6	3	2	11
25.	Acute and Chronic Nephritis .. .. .	47	..	..	..	1	4	7	20	15	20	42
26.	Puerperal Sepsis .. .. .	3	..	..	..	..	1	2	..	..	4	4
27.	Other accidents and diseases of Pregnancy and Parturition .. .. .	7	..	..	..	..	1	6	..	..	8	6
28.	Congenital Debility and Malformation, including Premature Birth .. .. .	76	73	1	1	1	..	..	..	..	21	73
29.	Suicide .. .. .	22	..	..	..	..	1	8	11	2	9	22
30.	Other Deaths from Violence .. .. .	66	2	4	3	4	10	16	15	12	59	66
31.	Other Defined Diseases .. .. .	280	29	6	5	12	16	36	68	108	124	2,0
32.	Causes ill-defined or unknown .. .. .	5	1	..	..	..	..	..	2	2	1	..
TOTALS .. .. .		1992	178	71	63	79	98	233	523	747	759	1991

## Uncertified Deaths.

There were 4 uncertified deaths during the year, or 0.2 per cent. of the total number. Deaths are recorded as uncertified when no medical certificate is forthcoming concerning the cause of death, and when no inquest has been held.

### Inquests.

Inquests numbering 163 appear to have been held during the year, including 24 enquiries into the deaths of non-residents.

### Infant Mortality.

There were 178 deaths of infants under one year of age, giving a mortality per 1,000 births of 73.1. The average figure for the previous ten years is 71.7. The rate for 1928 was 65.7.

Prematurity and pneumonia were the commonest causes of death.

The infant mortality of the 107 great towns (including London) was 79; that of the 157 smaller towns 69; and that for England and Wales 74.

The following table shows numerically for a number of years past, the deaths under one year of age per 1,000 births in Coventry compared with England and Wales generally :—

Year. (1)	England and Wales. (2)	COVENTRY.		
		Death-rate. (3)	*Neo-natal death-rate. (4)	Difference. (5)
1905	128	104	39.9	64.1
1906	133	144	40.1	103.9
1907	118	102	51.7	50.3
1908	121	93	36.1	56.9
1909	109	96	40.3	55.7
1910	106	86	40.7	45.3
1911	128	109	41.9	67.1
1912	95	76	36.0	40.0
1913	109	91.6	40.6	51.0
1914	104.8	84.6	36.5	48.1
1915	110.0	87.8	38.4	49.4
1916	91.0	87.5	37.4	50.1
1917	97.0	78.5	36.8	41.7
1918	97.0	92.5	37.5	55.0
1919	89.0	82.8	47.0	35.8
1920	80.0	76.0	36.6	39.4
1921	83.0	79.3	41.2	38.1
1922	77.0	70.4	32.7	37.7
1923	69.0	64.9	32.9	32.0
1924	75.0	79.4	36.9	42.5
1925	75.0	77.1	34.9	42.2
1926	70.0	68.9	38.7	30.2
1927	69.0	63.4	37.3	26.1
1928	65.0	65.7	39.5	26.2
1929	74.0	73.1	32.4	40.7

\* By neo-natal death rate is meant the death rate among infants under four weeks of age. These infants include those over whom the activities of a Sanitary Authority can have little effect. The difference between that rate and the infant mortality rate represents the rate in children over four weeks and under one year.



TABLE IV.—Infant Mortality during 1929.

Deaths from stated Causes at various Ages under One Year, and comparison of such deaths during the last ten years.

CAUSE OF DEATH.	Under 1 Day.	1-2 Days.	2-3 Days.	3-4 Days.	4-5 Days.	5-6 Days.	Total under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-3 Months.	3-6 Months.	6-9 Months.	9-12 Months.	Total Deaths under One Year.	Decennial Comparison.									
																	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929
All Causes. { Certified Uncertified	26 1	8 ...	9 ...	8 ...	2 ...	5 .	58 1	4 ...	9 ...	7 .	78 1	25 ...	23 ...	20 ...	31 ...	177 1	240 7	221 4	170 2	143 1	164 4	166 2	143 3	130 1	153 ...	177 1
Measles ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	2	1	5	...	...	3	1	...	...	3
Whooping Cough ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	12	7	3	8	1	6	5	8	3	1	12
Diphtheria ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	1	...	...	...	2
Influenza ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	1	...	...	...	...	...	...	...	...	3
Tuberculosis of Nervous System ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis of Intestines and Peritoneum ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Syphilis ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningitis ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Convulsions ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bronchitis ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Respiratory Diseases ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Inflammation of Stomach ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diarrhoea and Enteritis ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Hernia: Intestinal Obstruction ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Congenital Malformations ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Congenital Debility and Sclerema ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Icterus ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Premature Birth ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Injury at Birth ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diseases of Umbilicus ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Atelectasis ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Suffocation in Bed and not stated ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Causes ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TOTAL, ALL CAUSES ...	27	8	9	8	2	5	59	4	9	7	79	25	23	20	31	178	247	225	172	144	168	168	146	131	153	178

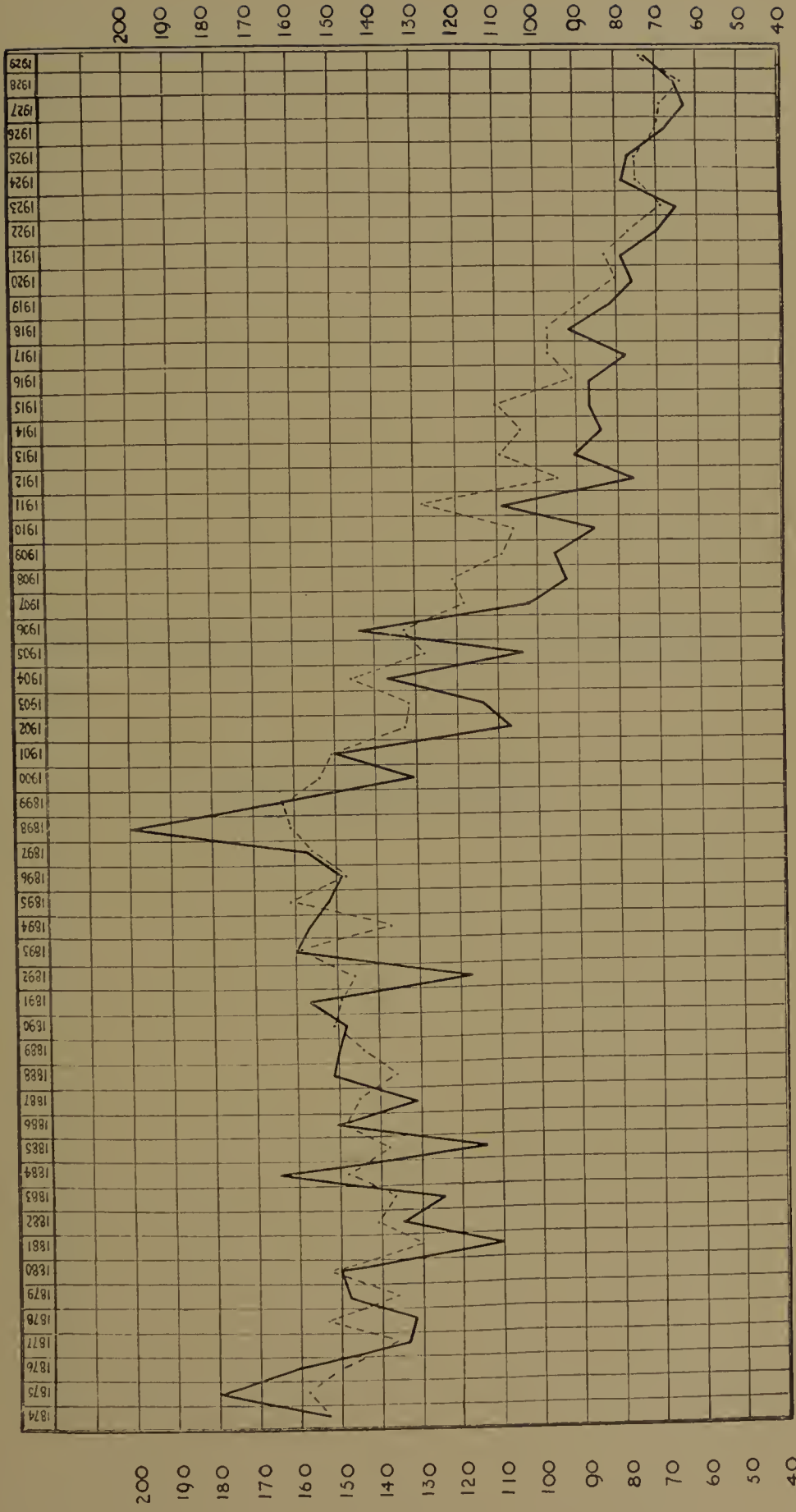
NOTES TO TABLE IV.

The total deaths here shewn (178) equal the total in column 3 of Table III., and the total in column 10 of Table I.

The relations between this Table and Table III., and also between the two Tables III. and IV., and the Extended Schedule of Deaths, are now clear and straightforward; and the headings in the smaller tables, of themselves explain the classifications in the Extended List they refer to.

# CHART SHOWING INFANTILE MORTALITY PER 1000

## BIRTHS IN COVENTRY SINCE 1874.



The black line represents Coventry's Infantile Mortality. The dotted line represents the Infantile Mortality in England and Wales.





Infectious and Other Diseases

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City Hospitals

## INFECTIOUS DISEASES.

Probably the most arresting epidemiological feature of the year was the wave of influenza which visited the city during the first quarter. This disease was responsible for no less than 97 deaths during the year and for a very large amount of morbidity, which latter cannot be stated in figures owing to the fact that influenza is not a notifiable disease. During this same period the country as a whole suffered very heavily, and as many as 15,012 deaths were recorded during the year in the 107 great towns in England and Wales as due to influenza. A fierce epidemic of the disease occurred in America in late 1928, and it would appear that the infection spread therefrom to this country, human travel being the agency of propagation. The extraordinary severity of the 1929 portion of the 1928-29 winter no doubt contributed to the serious mortality from influenza. This factor also operated in the case of other respiratory diseases, and in Coventry, during 1929, whooping cough, for instance, was responsible for 40, measles for 29, and pneumonia for 160 deaths. In view of the foregoing, it is not surprising that the City's general death rate and infant mortality rate for the year both showed an unwelcome increase.

Diphtheria was prevalent during the year, and 431 cases were notified, of which 37 proved fatal.

There were but three cases of small pox notified, and in this connexion Coventry escaped lightly in view of the prevalence of this disease in many towns having constant communication with the City.

These are the more outstanding features of the figures below.

The following table shows the number of deaths in the City from the principal infectious diseases during the past 20 years :—

Year.	Small Pox.	Typhoid Fever.	Diphtheria	Scarlet Fever.	Measles.	Whooping Cough.	Diar-rhœa.
1908	..	1	8	7	3	20	47
1909	..	4	11	24	67	29	18
1910	..	5	15	25	6	10	16
1911	..	1	17	30	66	30	51
1912	..	..	30	17	52	34	6
1913	..	2	33	2	9	22	21
1914	..	2	12	6	25	15	24
1915	..	5	37	14	87	13	16
1916	..	1	49	6	42	45	14
1917	..	1	26	4	21	1	9
1918	..	1	20	4	8	11	12
1919	..	2	16	1	14	8	3
1920	..	..	9	2	14	12	8
1921	..	1	8	4	1	4	14
1922	..	..	..	2	25	16	1
1923	..	1	7	..	6	12	1
1924	..	..	8	1	1	15	0
1925	..	..	15	..	13	9	3
1926	..	1	5	..	2	11	1
1927	..	..	21	1	5	6	0
1928	..	1	42	2	6	4	0
1929	..	2	37	1	29	40	0

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED								TOTAL CASES NOTIFIED IN EACH WARD OF THE CITY.														Cases removed to Hospital.			
	At Ages—Years.								All Saints	Bablake	Chylessmore	Earlsdon	Foleshill	Grey Friars	Harnall	Hill Fields	Longford	Radford	St. Mary's	St Paul's	Lower Stoke	Upper Stoke		Westwood		
	At all Ages.	Under 1.	1 and under 5.	5 and under 15.	15 & under 25.	25 & under 45.	45 & under 65.	65 & upwards.																		
Small-pox .. .. .	3	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	4
Cholera (C) Plague (P) .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria (including Mem- branous Croup) .. .. .	431	3	30	287	44	14	3	..	34	78	34	7	17	24	36	26	13	39	31	33	12	33	14	209	..	
Erysipelas .. .. .	69	1	3	7	5	22	26	5	2	2	2	5	2	1	6	..	11	7	6	10	4	10	1	..	..	
Scarlet fever .. .. .	497	68	309	86	32	2	..	..	18	42	24	26	31	22	41	51	52	44	30	28	27	48	13	436	..	
Typhus fever .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	2	
Enteric fever .. .. .	2	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Relapsing fever (R) .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Continued fever (C) .. .. .	..	..	..	..	..	..	..	..	..	..	..	3	..	..	3	..	..	2	2	1	2	..	..	..	6	
Puerperal fever .. .. .	15	..	..	..	2	13	..	..	..	2	..	..	..	..	..	..	2	..	3	1	2	1	1	13	..	
Puerperal Pyrexia .. .. .	23	..	..	..	9	14	..	..	2	2	..	3	1	4	1	..	..	..	..	..	..	..	..	..	..	
Cerebro-spinal Meningitis .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	
Polio-myelitis .. .. .	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Ophthalmia Neonatorum .. .. .	8	..	..	..	..	..	..	..	1	1	..	1	..	..	..	1	1	2	..	..	..	1	1	..	..	
Respiratory Tuberculosis .. .. .	262	..	..	11	81	113	54	3	28	14	16	11	12	19	24	31	14	14	21	13	9	20	16	176†	..	
Other forms of Tuberculosis .. .. .	37	..	6	14	10	6	1	..	2	6	2	1	..	3	4	1	3	5	4	5	..	..	1	5†	..	
Malaria .. .. .	1	..	..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	
Dysentery .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Acute Primary Pneumonia .. .. .	135	6	24	16	23	35	21	10	9	7	5	2	15	17	4	18	8	10	9	11	4	11	5	..	..	
Acute Influenzal Pneumonia .. .. .	87	2	6	7	10	29	23	10	7	5	5	5	8	4	7	11	8	5	6	5	3	5	3	..	..	
Acute Encephalitis Lethargica .. .. .	6	..	1	1	1	3	..	..	1	1	..	..	1	..	1	1	..	..	..	1	..	..	..	..	..	
Acute Polio-Encephalitis .. .. .	969	26	207	708	22	6	..	..	108	49	95	45	27	48	36	110	71	57	45	64	104	78	32	..	..	
Chicken Pox .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Totals .. .. .	2546	46	396	1362	294	289	131	28	212	207	183	109	114	145	164	250	183	185	158	176	167	206	87	851	..	

† These are cases removed to Sanatoria only.

Isolation Hospital or Hospitals, Sanatoria, &c.:—City Hospital and Pinley (Small Pox) Hospital, Coventry;  
Warwickshire King Edward VII. Memorial, Northwood and other Sanatoria (v. report).

## Scarlet Fever.

Four hundred and ninety-seven cases of scarlatina were notified during the year and one death only was registered as due to the disease. The attack rate per 1,000 population was 2.8 and the death rate 0.006. Four hundred and thirty-six (*i.e.*, 87.7 per cent.) of the notified cases were removed to the City Hospital.

The type of disease experienced in the City was generally mild.

In England and Wales the case rate per 1,000 population was 3.05 and the death rate 0.02.

## Typhoid Fever.

There were two cases notified as typhoid fever. Both were treated in the City Hospital, and in one case the disease proved fatal.

Two deaths were registered as due to this disease, comprising the one above mentioned, and one in respect of which no notification was received during life.

Typhoid is a disease the incidence and propagation of which bear close relationship to the sanitary circumstances of a community. The paucity of cases to-day is a tribute to modern sanitation.

## Small Pox.

Three cases only of small pox were notified during the year, with a nil mortality. All were of the type variously known as modified small pox, variola minor and alastrim. The ages of the patients were 58, 18 and 8 years respectively.

The unfailing criteria in diagnosis are prodromal illness and characteristic distribution of eruption.

Small pox has come to be endemic in this country of recent years. Its spread is facilitated by such modern habits as travel and attendance at crowded places of amusement. Vaccination or re-vaccination is the sure protection available to those who care to avail themselves of it. Coventry is largely an unvaccinated community, and future visitations of small pox are therefore not unlikely.

## Vaccination.

The following are the returns of the Vaccination Officer in recent years :—

Year.	Births.	Deaths Unvacci- nated.	Vaccinated.	Unvacci- nated.	Percentage Vaccinated	Declarations of Conscientious Objection.
1923	2421	149	411	1862	16·9	1342
1924	2354	177	476	1701	20·2	1082
1925	2377	127	850	1400	35·75	1338
1926	2377	156	594	1627	25·0	1478
1927	2247	112	542	1593	24·12	1361
1928	2427	151	558	1718	22·99	1461
1929	2502	172	506	1824	20·22	1617

In the year ended 31st December, 1929, there were 104 persons—other than children coming under the Act of 1867—who were vaccinated; of these 86 were primary cases and 18 were re-vaccinations. (These figures relate only to the work of the Public Vaccinators).

## Diphtheria.

During the year, 431 cases of diphtheria were notified and 37 deaths were registered from this cause. The attack rate was 2.5 per 1,000 of the population, and the mortality from the disease was 0.21 (as compared with 0.26 in 1928). Of the notified cases 209 were admitted to the City Hospital.

For England and Wales the case rate for the year per 1,000 population was 1.59 and the death rate 0.08. The local statistics in respect of diphtheria are not comforting. In this one respect Coventry compares unfavourably with the great towns as a whole. The disease has been on the increase in the City during the last two years, and the type of disease is more severe than formerly. A serious start was made during 1929, on diphtheria immunisation work in the City, and 1,171 school children were immunised. The preliminary Schick test was omitted in the case of children under ten years of age, and thereby the work was expedited. It

is abundantly clear, however, that if immunisation work is to have a salutary influence on the incidence of diphtheria in the City as a whole it will need to be undertaken on a much larger scale than the general parental attitude of to-day will permit. Those parents who do co-operate with the Department in this matter are assuredly doing the right thing by their children.

The figures relating to immunisation work performed during the year are as under :—

Number of children Schick tested	...	510 (over 10 years of age).
Number of children found Schick positive	... ..	291
Number of children immunised by means of a full course of three inoculations	... ..	1,171 (all ages).
Number of children re-tested after immunisation	... ..	167



## DIPHTHERIA :

Comparison of the Fatality, Incidence, and Mortality from, in different years.

Year.	Estimated Population.	Total No. of Cases Notified.	No. of Deaths Registr'd.	Fatality per cent.	No. of Cases Treated in Hospital	Attack Rate per 1000 Population.	Per-centage removed to Hospital.	Mortality per 1000 Population.
1890	49,500	15	6	40.0	..	0.30	..	0.120
1891	52,724	14	4	28.5	..	0.26	..	0.075
1892	54,000	19	2	10.5	..	0.35	..	0.037
1893	54,700	10	2	20.0	..	0.18	..	0.036
1894	55,300	21	5	23.8	..	0.38	..	0.090
1895	56,000	12	6	50.0	..	0.21	..	0.100
1896	59,151	17	6	35.3	..	0.28	..	0.100
1897	61,234	25	10	40.0	..	0.40	..	0.160
1898	61,555	33	15	45.4	..	0.53	..	0.240
1899	61,796	53	16	30.2	..	0.85	..	0.25C
1900	70,075	66	22	33.3	..	0.94	..	0.310
1901	70,300	139	31	22.1	4	1.97	2.8	0.440
1902	72,000	136	31	22.8	3	1.86	2.2	0.420
1903	75,700	127	34	26.7	1	1.67	0.7	0.450
1904	77,500	78	11	14.1	4	1.00	5.1	0.140
1905	81,000	67	13	19.4	3	0.82	4.4	0.160
1906	83,900	59	12	20.3	7	0.70	11.8	0.140
1907	87,000	43	10	23.2	1	0.49	2.3	0.110
1908	91,000	108	8	7.4	9	1.18	8.3	0.087
1909	93,500	121	11	9.0	8	1.20	6.6	0.110
1910	102,000	104	15	14.4	2	1.02	1.9	0.147
1911	107,287	161	17	10.5	13	1.50	8.0	0.158
1912	111,166	216	30	13.8	8	1.94	3.7	0.269
1913	115,064	187	33	17.6	20	1.62	10.7	0.286
1914	119,003	135	12	8.8	9	1.13	6.6	0.010
1915	122,982	209	37	17.7	31	1.69	14.8	0.300
1916	127,089	343	49	14.2	76	2.69	22.1	0.385
1917	130,000	178	26	14.6	31	1.36	19.1	0.200
1918	133,000	108	20	18.5	35	0.81	32.4	0.157
1919	136,000	136	16	11.7	49	1.00	36.0	0.117
1920	140,000	85	9	10.5	21	0.60	24.7	0.064
1921	128,205	102	8	7.8	27	0.79	26.4	0.060
1922	129,000	45	..	..	8	0.35	17.7	..
1923	130,500	77	7	9.0	17	0.59	22.1	0.050
1924	132,000	70	8	11.4	12	0.53	17.1	0.060
1925	133,500	190	15	7.8	24	1.42	23.1	0.110
1926	135,000	95	5	5.2	33	0.70	34.7	0.030
1927	139,000	186	21	11.3	60	1.34	32.2	0.151
1928	161,600	251	42	16.7	119	1.61	47.4	0.260
1929	172,000	431	37	8.6	209	2.51	48.5	0.210

## Other Notifiable Infectious Diseases.

## Pneumonia.

During the year, 135 cases of acute primary pneumonia and 87 cases of acute influenzal pneumonia were notified. The figure for 1928 in respect of the last named was 30. The increase in 1929 was due to the influenza epidemic, aided by the climatic rigours of the first quarter of the year.

The deaths registered from all forms of pneumonia numbered 160.

## Malaria.

One notification of malaria, which had been contracted abroad, was received.

## Acute Encephalitis Lethargica.

Six cases of this disease were notified during the year, and four deaths were attributed to it.

## Poliomyelitis.

One case only was notified as acute poliomyelitis.

No notifications were received in respect of the following :—  
Dysentery, cerebro spinal meningitis and acute polio-encephalitis.

## Influenza.

Previous mention has been made of the epidemic of influenza during the early part of the year under review. During late 1928 and early 1929 the disease became more or less world-wide in its incidence, though hardly to the extent of the well-remembered pandemic of 1918. Howbeit, this country suffered severely during the first quarter of 1929, and Coventry had its share of morbidity. It is difficult to estimate the latter (influenza not being a notifiable disease), although, judging by the returns of absentees from works, offices and schools at the time, the incidence in the City must have been very considerable.

The following table shows the number of deaths from influenza, pneumonia and bronchitis month by month during the year, viz. :—

1929. Month.	DEATHS FROM		
	Influenza.	Pneumonia.	Bronchitis.
January .. ..	3	16	27
February .. ..	31	34	54
March .. ..	48	41	46
April .. ..	5	12	9
May .. ..	3	5	6
June .. ..	1	5	4
July .. ..	1	6	4
August .. ..	—	2	7
September .. ..	1	8	3
October .. ..	1	7	10
November .. ..	2	14	6
December .. ..	1	10	5
TOTAL ..	97	160	181

## Measles and Whooping Cough.

During the year there were 29 deaths from measles, while 40 cases of whooping cough proved fatal.

These figures, together with the fact that but one death occurred from scarlet fever, should illustrate to many parents the need of reorientating their ideas as to the relative importance of the diseases just mentioned. It is an extraordinary thing that measles and whooping cough are still regarded as trivial ailments by many people in whom the merest mention of scarlet fever occasions concern.

Apart from mortality in measles and whooping cough, it is to be emphasised that these two diseases are capable of initiating severe respiratory complications and of creating susceptibility to tuberculosis.

It behoves parents zealously to guard their children against these infections, or if they do occur, to seek medical advice and generally to treat the diseases with respect.

## Cancer.

There were 213 deaths registered as due to cancer in the City during the year (as compared with 200 for 1928), of which 199 occurred in those over 45 years of age and 96 in those of 65 and over.

This disease bids fair to be the last stronghold to fall before the advances of preventive and curative medicine. Year by year the number of deaths registered as due to cancer increases in disquieting fashion. Yet is the position as bad as it would appear? The cumulative efforts of public health have succeeded in extending the average span of human life, so that to-day more people than formerly obtain to those ages at which cancer is most liable to supervene. The greater the proportion of older people in a community the greater will be the incidence of cancer therein. This, together with the generally improved standard of medical diagnosis which obtains to-day, explains largely—some would say wholly—the progressive increase in cancer deaths. To essay to stem the tide is the job of every medical man in his particular sphere. The public health worker can ventilate information to the people, emphasising the importance of immediate medical attention on the appearance of certain suspicious symptoms; the general medical practitioner can play a vital role in effecting early diagnosis; finally the surgeon cures or palliates the established

disease by surgery or radium. The surgeon can only cure the disease if presented to him early; the general practitioner or consultant can only diagnose the disease at this stage if the patient comes to him then; the patient will only go to him early enough if he realises the significance of first indications. The final responsibility in the matter then, clearly rests with the public health educator.

*It cannot be reiterated too often that cancer is curable in its earliest stages. The average person is enjoined not to imagine things but to consult his doctor. The fear of cancer should be allayed rather than created by propaganda on these lines.*

From the following tables some idea will be gathered of the mortality from this disease in the City.

CANCER—DEATHS AT DIFFERENT AGES IN PAST 10 YEARS  
AND IN 1929.

	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	Decennial.		1929
											Total.	Mean.	
0—1	..	1	..	1	..	..	..	..	..	..	3	·3	..
1—2	..	..	..	..	..	..	..	..	..	..	..	..	..
2—5	..	..	..	..	1	..	..	1	..	..	2	·2	..
5—10	..	..	..	1	..	1	..	..	..	1	3	·3	..
10—15	..	..	..	..	1	..	1	..	..	3	6	·6	..
15—20	..	1	..	..	..	1	..	..	1	1	4	·4	..
20—25	..	..	1	1	..	..	2	1	1	1	7	·7	3
25—35	2	1	2	2	1	1	3	2	5	4	27	2·7	1
35—45	15	7	8	14	5	9	8	6	10	12	102	10·2	10
45—55	30	25	41	26	26	29	35	29	26	42	338	33·8	41
55—60	16	25	19	20	14	23	31	27	20	36	247	24·7	29
60—65	17	14	26	26	26	30	18	28	24	33	258	25·8	33
65—75	17	33	35	31	38	41	41	35	48	46	392	39·2	70
75—85	11	15	14	13	8	12	14	15	20	18	152	15·2	23
85 & over	..	..	..	..	3	1	..	1	1	3	11	1·1	3
	108	122	146	135	123	148	153	145	156	200	1552	155	213
Death Rate	0·79	0·97	1·13	1·04	0·94	1·12	1·14	1·07	1·12	1·23		1·03	1·23

CANCER.—DEATHS ANALYSED ACCORDING TO PARTS AFFECTED.

	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	10 Years Average.	1929
Cancer (total number)...	108	122	146	135	123	148	153	145	156	200	143·6	213
Cancer of Buccal Cavity	9	13	17	10	6	14	13	11	8	23	12·4	13
Cancer of the Stomach, Liver, etc. ...	27	39	45	48	38	40	48	42	39	51	41·7	63
Cancer of Peritoneum, Intestines, Rectum	22	24	29	25	33	29	32	37	37	40	30·8	45
Cancer of Female Genital Organs ...	17	17	22	15	20	19	17	21	14	24	18·6	26
Cancer of the Breast ...	11	9	10	16	8	16	15	11	14	23	13·3	25
Cancer of the Skin ...	0	2	1	1	3	2	2	1	..	..	1·2	..
Cancer of other or un- specified organs ...	22	18	22	20	15	28	26	22	44	39	25·6	41

## THE CITY AND PINLEY ISOLATION HOSPITALS.

At the City Hospital 808 patients were treated during the year; of these 83 were remaining in at the beginning of the year and 725 were admitted during the period under review.

At the Pinley Small Pox Hospital 7 patients were admitted; none was in at the commencement of the year or at the year end.

The admissions to the Hospitals were made up as follows:—

*City Cases.*—Scarlet Fever, 436; Diphtheria, 209; Enteric, 2;

Small Pox, 3; Observation case, 1.

*Foleshill Rural District.*—Scarlet Fever, 18; Diphtheria, 14.

*Bedworth Urban District.*—Scarlet Fever, 36.

*Nuneaton.*—Small Pox, 3.

In addition, 10 sick staff were admitted to the City Hospital.

DISEASE.				In Hospital Jan. 1, 1929	Admitted during 1929.	Total.	Recovered.	Died.	Remaining in Hospital Jan. 1, 1930	Fatality per cent completed cases
CITY HOSPITAL.										
Enteric Fever .. .. .	..	..	..	..	2	2	1	1	..	50.0
Scarlet Fever .. .. .	..	..	..	67	486	553	477	3	73	0.63
Measles .. .. .	}	Admitted		..	1	1	1	..	..	..
Erythema .. .. .		as		..	2	2	2	..	..	..
Mastoid Abscess .. ..		Scarlet Fever		..	1	1	1	..	..	..
Diphtheria .. .. .	..	..	..	15	202	217	152	29	36	16.0
Tonsillitis .. .. .	}	Admitted		..	18	18	18	..	..	..
Thrush .. .. .		as		..	1	1	1	..	..	..
Measles .. .. .		Diphtheria		..	1	1	..	1	..	..
Quinsy .. .. .				..	1	1	1	..	..	..
Sick Staff .. .. .	..	..	..	1	10	11	11	..	..	..
				83	725		665	34	109	4.8
					808	808		808		
PINLEY HOSPITAL.										
Small Pox .. .. .	..	..	..	..	6	6	6	..	..	..
Observation Case ..	}	Admitted as		..	1	1	1	..	..	..
		Small Pox		..	7	7	7	..	..	..



## Diphtheria.

The number of cases admitted during 1929 was 202, which represents an increase of 89 over the preceding year. The type of case admitted was generally severe, although somewhat less so than in 1928. In the latter year the case fatality in hospital was 24.3 per cent., as compared with 16 per cent. in 1929. There were 29 deaths in hospital during the year from diphtheria; of these, 13 occurred within 24 hours of admission of the cases; the latter were all under 10 years of age. The vital importance of administering antitoxin in sufficient amount early in the disease, or even when the disease is but suspected, cannot be over-stressed. The hospital has little chance with cases (in which no antitoxin has been administered outside) admitted late in the course of the disease. To those cases arriving in hospital in a late stage, antitoxin was given intravenously. All cases so treated were in a serious condition on admission, having extensive membrane. In the case of children, 16,000 units and in adults 24,000 units of antitoxin were thus given, together with a subcutaneous injection of adrenalin to minimise possible "shock." During the year, 25 cases were treated in this manner, of whom 15 recovered.

## Tracheotomy.

The cases on whom tracheotomy was performed numbered 7, and in 4 cases success attended the operation.

The figures below show the number of cases admitted with a view to tracheotomy and the number of operations actually performed in different years since 1915, when a ward was first allocated for this purpose:—

### TRACHEOTOMY.

		Cases admitted for.	Cases operated upon.			Cases admitted for.	Cases operated upon.
1915	..	26	17	1923	..	4	2
1916	..	38	25	1924	..	3	2
1917	..	13	6	1925	..	19	11
1918	..	24	18	1926	..	16	9
1919	..	16	13	1927	..	11	4
1920	..	20	16	1928	..	23	10
1921	..	13	9	1929	..	13	7
1922	..	9	7				

## Scarlet Fever.

There was a reduction, as compared with the previous year, in the number of scarlatina admissions (486 in 1929; 539 in 1928).

The disease continues to be of a mild type and but 3 deaths (2 were "out-of-city" cases) from it occurred during the year; one died within 24 hours of admission, the second 30 days and the third 42 days after admission. Scarlet Fever antitoxin was administered only to the few cases presenting severe signs and symptoms.

### Enteric Fever.

During the year, two patients, both of whom were adults, were admitted as cases of typhoid. The first made a successful recovery, but the diagnosis of typhoid was not confirmed on bacteriological investigation. The second case unfortunately died after nine days in hospital.

### Small Pox.

Seven cases were admitted as small pox to the Pinley Hospital. One was discharged after a period of observation as not suffering from the disease. The six small pox cases were distributed in respect of age, sex, and vaccinal condition thus:—

Vaccinated in infancy	3	{	2 Males aged respectively 54 & 53
			1 Female aged 58

Not vaccinated prior to being infected	3	{	2 Males aged respectively 18 & 8
			1 Female aged 31

One of the latter had been successfully vaccinated subsequently to having been infected by small pox. The date of such vaccination was 3/4/29, and the date of appearance of the small pox eruption was 16/4/29.

### Averages and Hospital Costs.

The average period of stay of those patients who were admitted to the City Hospital was 36.0 days.

The maximum number of patients in the City Hospital at any time during the year was 123; and the minimum 39. The average throughout the year was 71.

The current expenses of the City Hospital (including capital charges) during the last financial year ended 31st March, 1929, amounted to £9,076 11s. 4d.; those for the Pinley Hospital to £790 12s. 11d.



During the same period the sum of £542 12s. 4d. was received on account of the admission of patients to the City Hospital from outside districts, etc., and £70 10s. 0d. was similarly received in connexion with Pinley Hospital.

The current expenses of the two hospitals for the year ended 31st December, 1929, totalled £7,755 for the City Hospital, and £553 for the Pinley Hospital.

For the City Hospital the sum above stated (£7,755) for maintenance expenses, divided among the average number of patients, amounted to 41/8d. per head per week.

### **Disinfecting and Ambulance Station.**

The following figures represent the work that has been done in connexion with the Disinfecting and Ambulance Stations :—

Visits paid to houses where Infectious disease			
was suspected or notified	...	...	2,474
Patients removed to the City Hospital	...		648
Patients removed to the Pinley Hospital	...		4
Houses disinfected by fumigation or spraying	...		930
Articles disinfected by steam	...	...	8,330

Disinfection of rooms by fumigation or spraying, and of clothing, etc., by steam has been carried out when necessary.

The work involved under this heading necessarily varies a great deal from year to year, according to the prevalence of those infectious diseases dealt with.

# Tuberculosis

## TUBERCULOSIS.

The incidence of and mortality from tuberculosis have shown a steady decline in recent years. How far this is due to the concerted efforts of the public health service it is difficult to say, though doubtless to the latter at least a share of credit must be accorded. The disease, nevertheless, still takes serious toll of life and health in the community.

The ætiology and prevention of this disease are intriguing subjects. We recognise in the bacillus tuberculosis the causative agent, and although the ubiquity of this organism is generally admitted, but a comparatively small proportion of the population contracts the disease—at any rate in recognisable form. The determining factors in respect of the acquisition of tuberculosis would appear then to be (i.) amount of infection taken into the body, and (ii.) the state of body-resistance at the time of infection.

These elementary considerations give us the keys to prevention. If infection cannot be obviated, at least something can be done to prevent mass-infection. It is necessary to secure that ample dilution of infective material obtains, and, in this connexion, fresh air is the diluent available. It must be essayed to secure such improvement in housing conditions that sufferers from open tuberculosis and susceptible contacts are no longer constrained to use confined sleeping rooms in common. This is the greatest difficulty of all. The most obvious preventive measure is to remove the sources of infection by admission of open cases to sanatoria. Institutional accommodation, however, is limited, so that but a limited sojourn therein can be arranged for selected cases. The principle involved in the work of After-Care Colonies is admirable. These colonies, which have been inaugurated in certain parts of the country, permit of more or less permanent segregation of tuberculous patients under conditions which allow of their performing productive work in ideal surroundings and under medical supervision. Here again, however, it is difficult to see how such colonies can be multiplied to the point of adequacy to deal with more than a proportion of eligible cases.

The prevention of mass-infection, then, involves considerations of fresh air, better housing and removal from communal contact of infectious cases, as far as limited institutional accom-

modation will permit. No mention has yet been made of the well-known role of milk in the propagation of tuberculosis. Against this contingency the use of certain graded milks or of pasteurized milk is the preventive weapon ready at hand for those who care to seize it.

There remains to be considered the matter of bodily resistance to tuberculous infection. Necessary for the maintenance of such resistance, are adequate nutrition, regular habits and wearing apparel capable of giving protection against adverse climatic conditions. Nothing short of general social and economic uplift will fully ensure these things to all.

As in many branches of medicine, so in tuberculosis, the period of childhood offers most scope to the preventive physician. Much has been said and written of the "pretuberculous" child. Although the term is not a good one, many who have done considerable work among children will agree, that there does exist a type of child who would appear to be especially prone to tuberculosis—one who, by reason of tuberculous family history and contact, of past debilitating disease, notably measles or whooping cough, or of delicate constitution, is unusually likely to fall a victim of the disease. We know that such children should be removed from an environment of infection, adequately nourished and clothed, and subjected to open-air schooling. Much can be done on these lines, although it is easier to express ideals than to put them into practice.

### **The Year's Record.**

During the year 274 new cases of Pulmonary Tuberculosis, and 41 new cases of Non-Pulmonary Tuberculosis came to the notice of this Department.

There were 158 deaths registered as due to Pulmonary Tuberculosis and 19 to other forms of Tuberculosis, giving a death rate of 0.91 for Pulmonary Tuberculosis, and a rate of 1.02 for all forms of the disease.

In 15 instances (10 pulmonary and 5 non-pulmonary) deaths were registered in the City as due to this disease, although no notification had been received that the deceased were suffering from tuberculosis. In these cases the attention of the medical

man was called to his failure to notify. In addition four inwardly transferable deaths, registered as due to this disease (two pulmonary and two non-pulmonary) related to persons who had not been notified.

It will be seen that of the 177 persons dying from all forms of tuberculosis during the year, there were 19 in regard to whom this Department had no previous knowledge, *i.e.*, 10.7 per cent.

RETURN OF NOTIFICATIONS RECEIVED IN 1929 UNDER THE PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1912.

Age Periods.		Number of Notifications on Form A.														Number of Notifications on Form B. †			Number of Notifications on Form C.			
		* Primary Notifications.														Total Notifi- cations on Form A 14	Primary Notifications*			Total Notifi- cations on Form B 19	Poor Law Insti- tutions. 20	Sana- Sana- toria. 21
		0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and upwards.	Total Primary Notifications 13	Under 5 15	5 to 10 16		10 to 15 17	Total Primary Notifications 18				
1	Pulmonary, Males	..	..	3	2	19	21	23	35	24	18	..	150	262	..	..	..	..	..	101		
"	" Females	..	..	4	3	23	17	30	20	8	6	1	112	184	..	..	..	..	..	61		
	Non-Pulmonary, Males..	..	5	5	1	2	5	2	1	..	..	..	21	25	..	..	..	..	..	7		
"	" Females	..	2	3	4	3	1	..	2	1	..	..	16	20	..	..	..	..	..	4		

The following Supplemental Return shows the number of New cases which came to the knowledge of the Department in 1929 otherwise than by notification on Form A and B as given above.

										SUMMARY	Pulmonary	Non-Pulmonary
Pulmonary, Males	..	..	1	..	1	3	1	..	6			
" Females	1	..	..	2	2	1	..	..	6	Notifications on Forms A and B ..	262	37
Non-Pulmonary, Males	.	2	..	..	..	1	1	..	4	Information from local death returns	10	5
" Females	..	..	1	1	..	..	..	..	3	" " transferable "	2	2
Totals	..	..	..	..	..	..	..	..	..	Totals	274	44



Year	Number of Cases	DEATHS										Total Deaths	Cases removed or lost sight of.	Cases cancelled by agreement with private doctors.	Cases cancelled by Tuberculosis Officer.	Cases cancelled: Disease quiescent for five years.	Total to be taken off Register.	Number of cases remaining on Register.
		1912 to 1916	1917 to 1921	1922 and 1923	1924 and 1925	1926	1927	1928	1929									
1912	411	86	14	5	1	3	1	..	2	112	87	20	8	22	249	162		
1913	322	118	10	..	2	..	2	..	1	133	79	6	3	35	256	66		
1914	308	139	20	4	2	..	2	1	1	169	63	8	4	32	276	32		
1915	427	124	47	8	6	4	3	1	1	193	88	9	9	63	362	65		
1916	465	80	72	7	2	2	1	1	1	166	138	8	16	77	405	60		
1917	518	..	150	6	6	3	3	1	1	170	180	11	20	86	467	51		
1918	488	..	116	6	8	5	4	1	1	141	154	19	18	96	428	60		
1919	346	..	111	15	6	..	1	..	..	134	69	26	21	56	306	40		
1920	296	..	87	28	6	2	4	..	..	127	74	8	21	33	263	33		
1921	278	..	62	41	17	6	7	4	2	139	60	7	21	30	257	21		
1922	246	..	..	97	22	6	3	1	3	132	40	8	17	17	214	32		
1923	238	..	..	60	57	7	6	5	1	136	37	3	11	13	200	38		
1924	205	..	..	..	83	12	9	3	7	114	26	2	3	11	156	49		
1925	208	..	..	..	66	27	20	6	10	129	18	1	1	..	149	59		
1926	193	..	..	..	..	61	31	15	12	119	16	..	1	..	136	57		
1927	150	..	..	..	..	..	46	23	14	83	11	..	..	..	94	56		
1928	303	..	..	..	..	..	..	82	35	117	15	..	5	5	142	161		
1929	274*	..	..	..	..	..	..	..	75	75	7	..	..	..	82	192		
Totals	5676	547	689	277	284	138	143	145	166†	2389	1162	136	179	576	4442	1231		

\* This number (274) is made up of:—Notifications on Forms A. and B.

Information from death returns

† This number (166) is made up of:—Deaths amongst notified cases  
Deaths from Phthisis of people not notified .. ; .. .. 12

## DEATHS FROM TUBERCULOSIS DURING THE LAST 56 YEARS.

Year.	Estimated Population.	Phthisis.	Phthisis Death Rate.	Averages of Phthisis Death Rates.	Other forms of Tuberculosis.	Totals.	Tuberculosis Death Rate.	Averages of Tuberculosis Death Rates.
1871†	39,000	38	1.94	1.94	12	50	2.56	2.53
1875	39,446	83	2.14		34	117	2.96	
1876	39,890	70	1.76		22	92	2.30	
1877	40,344	66	1.63		29	95	2.35	
1878	40,778	81	2.06		13	97	2.37	
1879	41,222	89	2.15	1.68	22	111	2.68	2.15
1880	41,666	78	1.87		36	114	2.74	
1881	42,111	65	1.54		28	93	2.20	
1882	42,750	62	1.47		22	84	1.96	
1883	44,000	74	1.73		15	89	2.02	
1884	44,500	82	1.84	1.58	18	100	2.24	1.93
1885	45,000	72	1.60		16	88	1.74	
1886	45,500	60	1.31		13	73	1.60	
1887	46,500	70	1.50		25	95	2.04	
1888	47,500	61	1.28		15	76	1.60	
1889	48,500	103	2.12	1.31	11	114	2.33	1.82
1890	49,500	91	1.84		21	112	2.26	
1891	52,724	78	1.47		14	92	1.74	
1892	54,000	79	1.46		33	112	2.07	
1893	54,700	70	1.28		30	100	1.82	
1894	55,300	73	1.32	1.22	32	105	1.88	1.72
1895	56,000	70	1.25		27	97	1.73	
1896	59,151	86	1.45		19	105	1.78	
1897	61,231	69	1.12		33	102	1.66	
1898	61,555	61	1.03		28	92	1.49	
1899	61,796	95	1.37	1.09	29	111	1.84	1.51
1900	70,075	105	1.49		36	141	2.01	
1901	70,300	83	1.18		35	118	1.67	
1902	73,000	81	1.10		39	120	1.64	
1903	75,700	87	1.15		43	130	1.71	
1904	77,500	78	1.00	1.05	30	108	1.39	1.39
1905	81,000	75	0.92		29	104	1.28	
1906	83,900	88	1.04		40	128	1.51	
1907	87,000	108	1.24		42	150	1.72	
1908	91,000	120	1.31		41	161	1.76	
1909	93,500	97	1.03	1.07	37	134	1.43	1.38
1910	102,000	88	0.87		49	137	1.35	
1911	107,287	87	0.80		30	117	1.08	
1912	111,166	115	1.03		34	149	1.34	
1913	115,064	*135	1.17		41	176	1.52	
1914	119,003	149	1.25	0.95	31	180	1.51	1.12
1915	122,982	147	1.19		44	191	1.55	
1916	127,089	155	1.22		42	197	1.55	
1917	130,000	154	1.18		52	205	1.58	
1918	133,000	168	1.26		44	212	1.59	
1919	136,000	131	0.96	0.88	36	167	1.22	1.00
1920	130,000	128	0.98		32	160	1.23	
1921	128,205	*110	0.86		31	141	1.10	
1922	129,000	134	1.04		19	153	1.18	
1923	130,500	124	0.95		25	149	1.14	
1924	132,000	119	0.90	0.88	28	147	1.11	1.00
1925	133,500	141	1.05		24	165	1.23	
1926	135,000	125	0.92		22	147	1.08	
1927	139,000	121	0.87		18	139	1.00	
1928	161,600	140	0.86		21	161	0.99	
1929	172,000	158	0.91		19	177	1.02	

\* If this table is compared with the corresponding table in previous Reports, it will be seen that the figures for the years 1913 to 1921 differ from those formerly given. This is due to the fact that deaths from miliary tuberculosis, which during those years were included under "phthisis," are now by international agreement, classified under "Other forms of tuberculosis," and the table has been altered accordingly.

† Half year only.

## PHTHISIS DEATHS.

Occupations of persons whose deaths were registered as  
due to Phthisis during 1929.

MALES.	FEMALES.
Engineers:—	Wives .. .. 20
Fitters .. .. 6	Clerks .. .. 5
Turners .. .. 9	Artificial Silk Workers .. 4
Machinists .. .. 10	Domestic Servants .. 3
Toolmakers .. .. 2	Machinists .. .. 3
Engineers .. .. 2	No Occupation .. .. 3
Labourers .. .. 31	School .. .. 3
Salesmen .. .. 7	Textile Workers .. .. 2
Trimmers .. .. 7	Widows .. .. 2
Clerks .. .. 6	Leather Dresser .. .. 1
No Occupation .. .. 3	Lingerie Maker .. .. 1
Builders .. .. 3	
Artificial Silk Workers .. 2	
Examiners .. .. 2	
Filers .. .. 2	
Polishers .. .. 2	
School .. .. 2	
Bricklayer .. .. 1	
Coremaker .. .. 1	
Crane Driver .. .. 1	
Fruiterer .. .. 1	
Lorry Driver .. .. 1	
Medical Practitioner .. .. 1	
Milkman .. .. 1	
Painter .. .. 1	
Sandblaster .. .. 1	
Traveller .. .. 1	
Undertaker .. .. 1	
Wireman .. .. 1	
111	47

## The Work of the Tuberculosis Dispensary.

### Report by the Tuberculosis Officer.

Dr. J. McG. Williams kindly reports as follows:—

“ During 1929 the number of new Coventry patients, including 7 tuberculous transfers from other areas, examined at or in connection with the Dispensary, was 804, as compared with 727 in 1928, and 590 in 1927. Of the 804 patients examined, 717 attended the Dispensary, and 87 were examined in their homes. The total attendances of Coventry patients at the Dispensary amounted to 3,485, and 78 home visits to old patients were made during the year. In 1928 the total number of attendances was 3,203, and in 1927, 2,890.

The Dispensary is open on Tuesdays from 5 to 9 p.m., and

on Fridays from 2 to 5 p.m., but patients can be seen on other days by appointment, and during the year the Dispensary was frequently open on other days for the examination of contacts and old patients, and for artificial pneumothorax treatment.

Dr. West resigned his post as Assistant Tuberculosis Officer early in the year, and Dr. Ogg, who was appointed in his place, commenced duties on the 1st April, 1929. Dr. Gerber resigned his post as Assistant Resident Medical Officer at the Memorial Sanatorium in September, and Dr. McMillan was appointed in his place. He also resigned before the end of the year, and Dr. Scott was appointed Senior Assistant Medical Officer, and Dr. Vince was appointed Junior Assistant Medical Officer in November, 1929, the post of clinical assistant being abolished.

The number of beds at the Memorial Sanatorium is 190, and 35 beds are provided in Hospitals by the Joint Committee for non-pulmonary tuberculosis. A few suitable patients are sent to Colonies for treatment and training.

In addition to the following tables, which give the usual information about the Coventry patients dealt with under the Joint Committee's scheme, further tables will be found in the appendix to this report :—

New Patients—				New Patients—			
Adults	Male	..	318	804*	Pulmonary	..	223
	Female	..	261		Non-Pulmonary	..	26
Children	Male	..	110		Not Tuberculous	..	555
	Female	..	115		Doubtful (under observation 31st Dec., 1929)		0

\* Including 7 transfers from other areas, all tuberculous.

	On Dispensary Treatment 1st January, 1929.	Put on Dispensary Treatment during 1929.	Total.
Adults ..	6	8	14
Children ..	1	2	3
			17

Contacts Examined.	Tuberculous.	Not Tuberculous.	Doubtful—under observation.
246	7	239	0

*Contacts.*

	Males.	Females.	Totals.
Over 15 .. .	41 .	66	107
Under 15 .. ..	69	70	139

Attendances of Coventry patients	...	3485 x
Attendances of County patients	...	900 xx
		<hr/> 4385 <hr/>

x Including 81 attendances for artificial pneumothorax treatment.

xx Including 28 attendances for artificial pneumothorax treatment.

At the end of 1928 two doubtful cases were under observation ; neither of these was diagnosed as tuberculous during 1929.

*Stage of Disease (New Cases).*

Tubercle Bacilli not present.	Pulmonary.			Non-Pulmonary.				Doubtful under observa- tion.	Not Tuber- culous.	Total.
	Tubercle Bacilli present.			Bones and Joints	Abdom- inal	Other Organs	Peri- pheral Glands			
	Stage 1	Stage 2	Stage 3							
18	76	82	47	13	6	3	4	0	555	804
223				26						

The 555 non-tuberculous cases are not included in the following tables :—

*Age Periods (New Cases).*

0-5.	5-10.	10-15.	15-20.	20-25.	25-30.	30-35.	35-40.	40-45.	45-50.	50-55.	55-60.	Over 60.	Total.
6	12	6	54	32	26	23	29	22	22	8	4	5	249

*Condition of Teeth (New Cases).*

Good, up to 4 Decayed.	More than 4 Decayed.	Pyorrhoea Alveolaris	Dentures, Partial or Complete.	Total.
144	31	23	51	249

*Family History of Tuberculosis (New Cases).*

Near Relative(s) Tuberculous.	Distant Relative(s) Tuberculous.	No Relatives Tuberculous.	Total.
64	36	149	249

*Sputum Examination.*—Six hundred and thirty-three (633) specimens of sputum were examined in the laboratory at the Dispensary, and 730 specimens were sent to the Lister Institute. The sputum of 205 of the 223 definite cases of pulmonary tuberculosis contained tubercle bacilli, eight patients had no sputum, and the sputum of ten patients was negative.

*Institutional Treatment.*—Information concerning the number of admissions and discharges, average length of stay, and institutions made use of during the year, is given in the following tables :—

*Sanatoria :—*

	Admissions.	Discharges.
Liverpool Sanatorium, Frodsham	16	4
Memorial Sanatorium	... 160	148

*Hospitals :—*

Birmingham Cripples (Orthopædic)	0	1
Coventry Hospital	... 1	0
Manfield (Northamptonshire)	... 3	2
Rugby	... 1	3
Warwickshire Orthopædic (St. Gerard's, Coleshill)	... 0	2
	<hr/> 181	<hr/> 160

*Deaths in Institutions (included in discharges) :—*

Manfield Hospital (Northants)	... 1
Memorial Sanatorium	... 18
Warwickshire Orthopædic Hospital (St. Gerard's, Coleshill)	... 1

Average duration of treatment, all institutions... 30.5 weeks

Average duration of treatment, Memorial Sanatorium ... 28.2 weeks

Details as to the immediate results of institutional treatment will be found on page 52.



*Contributions by Patients.*—The Treasurer informs me that the total amount received from Warwickshire and City patients was £443 7s. 10d. The amount received in 1928 was £376 18s. 11d., in 1927 £269 19s. 1d., and in 1926 £266 5s. 3d.

Old cases of at least six months' duration were examined, with a view to finding their working capacity. The following table gives the number at work, the number fit for light work, and the number not working and unfit for work of any kind :—

Doing some work at date of examination.	Not working, but fit for light work.	Unfit for work of any kind.	Total
241	34	151	426
56·5%	8%	35·5%	

*Contacts.*—Routine examination of contacts was continued, and, as usual, little difficulty was experienced in arranging the examinations, and only 14 contacts failed to keep their appointments. It was found that seven persons out of 246 examined were definitely tuberculous. Further particulars will be found in the tables earlier in this Report and in the appendix.

*Dispensary Treatment.*—The number of patients who attended the Dispensary for some form of treatment was seventeen. During the year nine patients having artificial pneumothorax treatment made 81 attendances at the Dispensary, and seven patients being treated with tuberculin made 82 attendances.

*X-Ray Examinations.*—There were 827 X-Ray examinations of Coventry patients made during 1929. Of these, 808 were screen examinations, and 19 patients were photographed. Eight hundred and four (804) examinations of the chest were made, and 23 examinations of other parts of the body. In 1928 the number of X-Ray examinations was 899.

*Shelters.*—The Joint Committee continued to make use of the shelters owned by the City Council, as in previous years. On the 31st December, 1929, 15 of the Coventry shelters were in use. During the year 4 shelters were removed on ceasing to be required, and 8 were erected at new addresses.

*Children.*—Two hundred and twenty-five (225) children up to the age of 15 were examined at or in connection with the Dispen-

sary. Of these, nine were suffering from pulmonary tuberculosis, and 13 from non-pulmonary tuberculosis. The pulmonary cases were classified into Stage I., 8; Stage II., 1; Stage III., 0.

*Dental Treatment.*—Particulars of the dental treatment given at the Memorial Sanatorium appear in the Annual Report of the Medical Superintendent. One patient on domiciliary treatment had dental treatment during the year.

*After-Care.*—Efforts were made to obtain suitable employment, clothing, and financial help for necessitous cases, on the same lines as in previous years. Gifts of clothing and sums of money amounting to £29 4s. 8d. were received from various sources. There were 222 applications for help, and the cases were dealt with by the Tuberculosis Nurse as follows :—

Financial help, 48; employment found, 4; clothing supplied, 44; relief from Guardians, 7; admitted to Infirmary, 12; nursing arrangements, 34; sent to convalescent homes, 2; special social service, 13; help to obtain pensions and grants, 3; house obtained, 1; coal tickets, 33; admitted to Corley, 3; unable to help, 18.

The Tuberculosis Nurse made 313 visits to patients' homes, 18 of these being to discharged ex-service men; and the Health Visitors paid 1,386 such visits, of which 26 were to discharged soldiers and sailors.

*Extra Nourishment.*—The Joint Committee continued to grant extra nourishment to suitable cases. Their expenditure must not exceed £2 per thousand of the population of the area. During the year the Committee provided extra nourishment for 51 Coventry patients. The Treasurer informs me that the sum of £281 3s. 2d. was spent on extra nourishment for Coventry patients, and £373 8s. 8d. for Warwickshire patients during the year. In 1928, the amount spent for the whole Joint Committee's area was £606 3s. 6d., and in 1927 £573 3s. 4d. As a general rule the Committee do not give grants of extra nourishment to patients whose total family income, after deducting the rent, exceeds 10/- per head per week.

*Payment of Patients' Travelling Expenses.*—The Joint Committee have power to pay the travelling expenses of necessitous patients between their homes and Dispensaries and Sanatoria. During the year the sum of £1 6s. 8d. was spent on Coventry patients.

The following information relating to the incidence of, and deaths from tuberculosis, and the provision made for the treatment of this disease may be of interest. The information is taken from the Annual Report of the Chief Medical Officer of the Ministry of Health for the year 1928.

The number of new cases of tuberculosis in England and Wales fell from 90,573 in 1918 to 77,881 in 1928. The number for 1928 was, however, only 8 less than for 1927. The number of deaths registered from tuberculosis fell from 58,073 in 1918 to 36,623 in 1928. The deaths in 1928 were 1550 fewer than in 1927.

In England, at the beginning of April, 1929, tuberculosis work was being carried out in 473 Dispensaries, and in addition 73 other premises were approved for special forms of treatment, including orthopædics. The number of approved Residential Institutions on that date was 494, providing 23,260 beds. There were other hospitals approved for the treatment of tuberculosis, but the number of beds provided is not available."

TABLE I.

Annual Return showing the work of the Tuberculosis Dispensary  
during the year 1929.

DIAGNOSIS.	Pulmonary				Non-Pulmonary				Total			
	Adults		Children		Adults		Children		Adults		Children	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
A. NEW CASES examined during the year (excluding contacts):—												
(a) Definitely tuberculous ..	119	83	2	3	7	5	6	7	126	88	8	10
(b) Doubtfully tuberculous ..	..	..	..	..	..	..	..	..	18	12	6	7
(c) Non-tuberculous ..	..	..	..	..	..	..	..	..	131	92	26	26
B. CONTACTS examined during the year:—												
(a) Definitely tuberculous ..	1	4	1	1	0	0	0	0	1	4	1	1
(b) Doubtfully tuberculous ..	..	..	..	..	..	..	..	..	1	3	2	2
(c) Non-tuberculous ..	..	..	..	..	..	..	..	..	39	59	66	67
C. CASES written off the Dispensary Register as:—												
(a) Cured .. .. .	18	9	0	1	3	2	1	1	21	11	1	2
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error .. .. .	..	..	..	..	..	..	..	..	190	166	101	101
D. NUMBER OF PERSONS ON Dispensary Register on Dec. 31st:—												
(a) Diagnosis completed ..	313	199	16	13	23	22	21	16	336	221	37	29
(b) Diagnosis not completed ..	..	..	..	..	..	..	..	..	..	..	..	..
<hr/>												
1. Number of persons on Dispensary Register on January 1st .. ..	570											
2. Number of patients transferred from other areas and of "lost sight of" cases returned .. ..	9											
3. Number of patients transferred to other areas and cases "lost sight of" .. .. .	28											
4. Died during the year .. ..	132											
5. Number of observation cases under A (b) & B (b) above, in which period of observation exceeded 2 months .. ..	5											
6. Number of attendances at the Dispensary (including contacts) ..	3485											
7. Number of attendances of non-pulmonary cases at Orthopædic Out-stations for treatment or supervision .. .. .	295											
8. Number of attendances, at General Hospitals or other Institutions approved for the purpose, of patients for:—												
(a) "Light" treatment .. ..	129											
(b) Other special forms of treatment .. .. .	204											
9. Number of patients to whom Dental Treatment was given, at or in connection with the Dispensary ..	146											
10. Number of consultations with medical practitioners:—												
(a) At Homes of Applicants ..			92									
(b) Otherwise .. .. .			482									
11. Number of other visits by Tuberculosis Officers to Homes ..			73									
12. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes .. ..			2947									
13. Number of:—												
(a) Specimens of sputum, etc. examined .. .. .			1363									
(b) X-ray examinations made in connection with Dispensary work ..			827									
14. Number of Insured Persons on Dispensary Register on the 31st December .. .. .			398									
15. Number of Insured Persons under Domiciliary Treatment on the 31st December .. .. .			196									
16. Number of reports received during the year in respect of Insured persons												
(a) Form G.P.17 .. .. .			135									
(b) Form G P.36 .. .. .			516									

TABLE II.

Return showing the immediate results of treatment of Tuberculosis patients and of observation of doubtful cases discharged from Residential Institutions during the year 1929.

PULMONARY TUBERCULOSIS.	Classification on admission to the Institution.	Condition at time of discharge.	Duration of Residential Treatment in the Institutions.												
			Under 3 months			3-6 months.			6-12 months.			More than 12 months.			Total.
			M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	
Class T.B. minus.	Quiescent .. .. .	1	..	..	4	..	..	1	1	..	..	..	..	7	
	Improved .. .. .	..	1	1	3	..	..	..	..	2	..	..	..	7	
	No material improvement	1	1	1	..	..	..	..	..	..	..	..	..	3	
	Died in Institutions ..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Class T.B. plus. Group 1.	Quiescent .. .. .	..	..	..	5	..	..	1	1	..	..	..	..	7	
	Improved .. .. .	..	1	..	4	5	..	1	1	..	..	..	..	12	
	No material improvement	..	..	..	..	..	..	..	..	..	..	..	..	..	
	Died in Institutions ..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Class T.B. plus. Group 2.	Quiescent .. .. .	2	..	..	3	2	..	2	2	..	1	..	..	12	
	Improved .. .. .	3	1	..	7	6	..	7	4	..	3	..	..	31	
	No material improvement	1	2	..	3	3	..	1	2	..	..	..	..	12	
	Died in Institutions ..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Class T.B. plus. Group 3.	Quiescent .. .. .	..	..	..	1	..	..	1	..	..	..	..	..	2	
	Improved .. .. .	1	1	..	5	..	..	2	..	..	1	1	..	11	
	No material improvement	4	3	1	2	5	..	4	..	..	4	..	..	23	
	Died in Institutions ..	9	1	..	2	..	..	2	4	..	..	..	..	18	
Bones and Joints.	Quiescent .. .. .	..	..	..	..	..	..	..	..	..	..	..	1	1	
	Improved .. .. .	2	..	..	..	..	..	1	..	..	..	..	3	6	
	No material improvement	..	..	..	..	..	..	..	..	..	..	..	..	..	
	Died in Institutions ..	..	..	..	..	..	..	..	..	..	..	..	2	2	
Abdominal.	Quiescent .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	
	Improved .. .. .	..	..	..	..	..	..	..	..	..	..	..	1	1	
	No material improvement	..	..	1	..	..	..	..	..	..	..	..	..	1	
	Died in Institutions ..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Other Organs.	Quiescent .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	
	Improved .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	
	No material improvement	..	..	..	..	..	..	..	..	..	..	..	..	..	
	Died in Institutions ..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Peripheral Glands.	Quiescent .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	
	Improved .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	
	No material improvement	..	..	..	..	..	..	..	..	..	..	..	..	..	
	Died in Institutions ..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Observation for purpose of diagnosis.		Under 1 week.			1-2 weeks.			2-4 weeks.			More than 4 weeks.				
	Tuberculous .. .. .	..	..	..	..	..	..	..	..	..	..	2	..	2	
	Non-tuberculous .. ..	..	..	..	..	..	..	..	..	1	..	1	..	2	
	Doubtful .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	
		24	11	4	39	21	..	23	15	3	9	2	9	160	



## THE MEMORIAL SANATORIUM.

The essential information contained in the 1929 Annual Report on the above by the Medical Superintendent, Dr. Heaf, is given below :—

TABLE I.

*Warwickshire Patients.*

			In Inst. on Jan. 1st. 1929	Admitted during the year	Discharged during the year	Died in the Inst.	In Inst. on Dec. 31st 1929
No. of Patients	Adults	M.	37	77	62	12	40
		F.	36	75	59	14	38
	Chil- dren	M.	14	11	13	...	12
		F.	11	7	8	2	8
No. of Observation Cases	Adults	M.	3	...	3	...	...
		F.	1	2	3	...	...
	Chil- dren	M.	...	...	...	...	...
		F.	...	1	1	...	...
Total ...	...	...	102	173	149	28	98

*Coventry Patients.*

No of Patients	Adults	M.	48	91	79	13	47
		F.	23	50	39	5	29
	Chil- dren	M.	4	8	6	...	6
		F.	3	7	2	...	8
No. of Observation Cases	Adults	M.	..	1	...	...	1
		F.	..	1	1	...	...
	Chil- dren	M.	1	1	2	...	...
		F.	...	1	1	...	...
Total ...	...	...	79	160	130	18	91

TABLE II.

## STAGES OF DISEASE.

*Warwickshire Patients.*

Class Tubercle Bacilli minus	Stage 1.	Stage 2	Stage 3	Non- Pulmonary	Observation
30	11	45	50	6	7

Warwickshire Total 149

*Coventry Patients.*

Class Tubercle Bacilli minus	Stage 1	Stage 2	Stage 3	Non- Pulmonary	Observation
17	15	55	36	3	4

Coventry Total 130



TABLE III.

**Condition on Discharge.****WARWICKSHIRE PATIENTS.**

Quiescent.	Improved.	No material improvement.	Died.	Observation.
17	82	43	28	7

Warwickshire Total 177

**COVENTRY PATIENTS.**

28	59	39	18	4
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Coventry Total 148

TABLE IV

**Duration of Stay.****WARWICKSHIRE PATIENTS**

No. of patients discharged during 1929, who had more than 12 months treatment					24
"	"	"	"	" 6-12	" " 43
"	"	"	"	" 3-6	" " 55
"	"	"	"	" under 3	" " 20
No. of observation cases discharged during 1929 who had under 1 week's observation					0
"	"	"	"	" 1-2	" " 0
"	"	"	"	" 2-4	" " 0
"	"	"	"	" more than 4	" " 7
Total					149

**COVENTRY PATIENTS.**

No. of patients discharged during 1929, who had more than 12 months treatment					12
"	"	"	"	" 6-12	" " 33
"	"	"	"	" 3-6	" " 54
"	"	"	"	" under 3	" " 27
No. of observation cases discharged during 1929 who had under 1 week's observation					0
"	"	"	"	" 1-2	" " 0
"	"	"	"	" 2-4	" " 1
"	"	"	"	" more than 4	" " 3
Total					130

Average duration of stay of Warwickshire patients					29.6 weeks.
"	"	"	Coventry	"	28.2 "
"	"	"	All	"	28.9 "

(8) *Laboratory.*—The total number of Sputum examinations was 860. The total number of Pathological examinations made was 56. Two animal inoculations were performed.

Experimental work had to be discontinued owing to an outbreak of dysentery amongst the guinea-pigs.

(9) *X-Ray Work*.—During the year we have made :—

2,260 Screen examinations.

180 Photographs (including 6 Bismuth Meals and 3 Lipiodal Injections).

In determining the most beneficial treatment we depend very largely on good X-Ray photographs. Occasionally we are able to take moderately good films with the present apparatus, but often the results are variable and poorly defined. Every effort is being made to improve our technique at the least possible expense, but it may be necessary to replace part of the apparatus in order to standardise our work with that of other institutions.

(10) *Treatment*.—During the year :—

46	patients	were	treated	by	Artificial	Pneumothorax	(Unilateral)
3	"	"	"	"	"	"	(Bilateral)
22	"	"	"	with	Sanocrysin.		
10	"	"	"	"	"	and	Artificial Pneumothorax.
4	"	"	"	by	Vaccine.		
9	"	"	"	with	Tuberculin.		
57	"	"	"	by	Artificial Sunlight	(42 adults, 15 children)	
3	"	"	"	sent	to	Victoria Park Hospital	for Surgical Treatment.

*Number of attendances made by Out-patients for Special Treatment and Examinations :—*

271	attendances	for	treatment	by	Artificial	Pneumothorax.
762	"	"	"	"	"	Sunlight.
30	"	"	"	"	"	of Larynx.
94	"	"	"	"	"	examinations.

---

1157 Total attendances.

---

*Artificial Sunlight Treatment*.—During 1929 fifty-seven patients were treated in the Light Department. The cases consisted of patients suffering from :—

(1)	Lupus	..	..	..	..	8 adults and 1 child
(2)	Tuberculous Peritonitis	..	..	..	10	4 children
(3)	" Peripheral Glands	..	..	..	5	8 "
(4)	" Laryngitis	..	..	..	7	"
(5)	" Joints	..	..	..	3	1 child
(6)	Rheumatism	..	..	..	5	"
(7)	Tuberculous Ischio Rectal Abscesses	..	..	..	2	"
(8)	Ringworm	..	..	..	1	adult
(9)	Debility. Non-tuberculous	..	..	..	1	child
(10)	Tuberculous Empyema. Sinus	..	..	..	1	adult

In many cases a combination of treatments by both Carbon Arc and Mercury Vapour Lamps has been given, and in Lupus the Kromayer Lamp has been used in conjunction with the Hanovia Mercury Vapour Lamp. The application of both long and short rays has been found more beneficial than limiting treatment to the use of one type of ray. Variable results have been obtained in treating tuberculous laryngitis, but the two cases treated by direct application of the ultra violet rays on the larynx through a direct laryngoscope encourage us to proceed with this treatment in the future. Some particularly good results have been obtained in cases of Peritonitis, which has occurred as a complication of Pulmonary Tuberculosis. In Rheumatoid affections it was found that superior results are obtained by using the Hanovia Mercury Vapour Lamp and the Solux Lamp than with the latter alone. Our results in Peripheral Glands confirm the work of other observers, but we have noted that when the light treatment is given in conjunction with Tuberculin, in these cases the exposures have to be shortened by half the usual time, otherwise severe local reactions often occur.

(11) *Ward Industries*.—Patients who are unable to proceed with gradual exercise are given work under the Ward Industry Scheme. Rug making, raffia work and basket work have been established, and, under the supervision of Miss Dodd, a considerable amount of good work has been executed. When sufficient articles have been made, a sale will be arranged, and eventually we hope to be able to take advantage of Mrs. Fowler's kind offer of a show window in the Parade, Leamington Spa.

(12) The year has been devoted to the re-organisation of the services of the Institution to cope with the increased number of patients under treatment.

Artificial Pneumothorax treatment still holds a place in the first rank in producing good results, and in a number of instances it has been applied with success to cases with both lungs affected.

Tuberculosis of the Larynx has been frequent, and no effort has been spared in applying all known treatments to patients suffering from this terrible form of the infection. Failures to produce good results have been many. Nevertheless, it is felt that progress in treatment is being made, and that each year brings more hope to those afflicted by this distressing malady."

# Venereal Diseases

## VENEREAL DISEASES.

The work of the Venereal Diseases Clinic at the Coventry and Warwickshire Hospital has continued on the same lines as in previous years. Statistical details of this work are set out in tabular form on pages 60 and 61.

At the commencement of the year there were 649 males and 278 females under treatment or observation at the Clinic, as compared with 606 males and 266 females at the year-end.

Out of a total of 1,320 patients, 130 ceased to attend the clinic before their first course of treatment was completed; 12 ceased attendance after one or more courses but before actual completion of treatment; and 14 failed to attend for final tests, although they completed their treatment. These figures are significant, for uncured cases are liable to pass on their contagion to others, and are moreover at risk themselves in respect of many serious sequelæ in later life; so much so, that in certain countries (for example Australia) it is an offence against the law to forsake treatment before completion. In this country rather is reliance placed on the patients' spirit of public duty.

The numbers of *new* cases treated year by year at the Clinic are shown below :—

	1923	1924	1925	1926	1927	1928	1929
Syphilis ... ..	110	95	121	106	147	182	143
Soft Chancre ... ..	2	..	1	..	..	..	..
Gonorrhœa ... ..	94	96	111	129	142	162	165
Conditions other than Venereal ... ..	60	68	58	65	66	71	75
TOTALS ... ..	266	259	291	300	355	415	383

The new cases for the year show a decrease of 32 under those for 1928, but an increase of 59 as compared with the average for the previous quinquennium. Venereal disease, then, would appear to be giving little ground, although to-day doubtless a larger proportion than ever of those infected present themselves for official treatment.

As regards treatment by private practitioners, there are twenty of the latter qualified to receive free supplies of salvarsan

substitutes, and in this connexion 228 doses of novarsenobillon, 189 doses of kharsulphan, 62 doses of stabilarsan and 24 doses of sulphostab were supplied during the year.

Measures for the prevention of venereal disease are wide in their application. Adequate treatment, for instance, is preventive in that it renders cases non-infective. The real fount of prevention, however, is education in social hygiene applied in appropriate quarters. The older school child and adolescent should be so equipped with a knowledge of life in its significant bearings that he will be forearmed against the many social pitfalls in later years. Next in importance as an agency of prevention is social pre-occupation of young people effected by a liberal provision of facilities for wholesome recreation, notably in the form of outdoor games.

Dr. Hawley, the Medical Officer in charge of the Venereal Diseases Department at the Coventry and Warwickshire Hospital, kindly reports as follows:—

“The number of new cases attending the Clinic during the year was 383, as compared with 415 in 1928. The number of cases of Syphilis showed a decrease of 39, but there was a small increase of 3 in the number of new cases of Gonorrhœa.

Out-patient attendance during 1929 numbered 9,399, and the number of in-patient days was 317.

The Arsenobenzene Compounds in use during the year have included Stabilarsan and Sulphostab, and the total number of doses used was 2,319.

Increasing use has been made of the assistance available through the pathological laboratory at this Hospital, and 224 specimens have been sent there and examined for Gonococci, etc.

The Centre continues to fill a necessary want in the community, and its services are fully appreciated by sufferers from Venereal diseases, and by the medical men of the City for the assistance accorded them in matters of diagnosis.”



# VENEREAL DISEASES.

Return relating to all persons who were treated at the Treatment Centre at the Coventry and Warwickshire Hospital during the year ended the 31st December, 1929.

	Syphilis.		Soft Chancre.		Gonorrhoea.		Conditions other than Venereal.		TOTAL.	
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.
1a. Number of cases which at the beginning of the year under report were under treatment or observation for ... ..	431	223	...	...	218	55	...	...	649	278
1b. Number of cases which had been marked off in a previous year as having ceased to attend or as transferred to other Centres, and which returned to the Treatment Centre during the year under report <i>suffering from the same infection</i> ... ..	5	2	...	...	1	2	...	...	6	4
2a. Number of cases dealt with at the Treatment Centre during the year for the first time ... ..	80	63	...	...	141	24	59	16	280	103
TOTAL—Items 1a, 1b and 2a	516	288	...	...	360	81	59	16	935	385
3. Number of cases which ceased to attend— (a) before completing the first course of treatment for ... .. (b) after one or more courses, but before completion of treatment for ... ..	48	32	...	...	41	9	...	...	89	41
(c) after completion of treatment but before final tests as to cure of ... ..	7	5	...	...	...	...	...	...	7	5
4. Number of cases transferred to other Treatment Centres after treatment for ... ..	9	3	...	...	...	2	...	...	9	5
5. Number of cases discharged after completion of treatment and observation for ... ..	2	...	...	...	3	1	...	...	5	1
6. Number of cases which, at the end of the year under report were under treatment or observation for ... ..	21	17	...	...	79	15	...	...	100	32
TOTAL ITEMS 3, 4, 5 & 6...	399	218	...	...	207	48	...	...	606	266
7. Out-patient attendances— (a) For individual attention by M.O. ... .. (b) For intermediate treatment, e.g., irrigation, dressings, &c. ...	486	275	...	...	330	75	...	...	816	350
TOTAL ATTENDANCES...	1705	1457	...	...	1343	208	170	77	3218	1742
8. Aggregate number of "In-patient days" of treatment given to persons who were suffering from ... ..	167	141	...	...	3232	1184	...	2	3232	1207
TOTAL ATTENDANCES...	1705	1478	...	...	4575	1392	170	79	6450	2949
8. Aggregate number of "In-patient days" of treatment given to persons who were suffering from ... ..	167	141	...	...	3	6	...	...	170	147

## 9. Examinations of Pathological material:—

- (a) Specimens which were examined at, and by the Medical Officer of, the Treatment Centre  
 (b) Specimens from persons attending at the Treatment Centre which were sent for examination to an approved laboratory ... ..

Spirochetes.	Gonococci.	Other Organisms.	Wassermann Reaction.
10	191	10	13
...	...	4	176

STATEMENT SHOWING THE SERVICES RENDERED AT THE TREATMENT CENTRE DURING THE YEAR, CLASSIFIED ACCORDING TO THE AREAS IN WHICH THE PATIENTS RESIDED.

Name of County or County Borough (or Country in the case of persons residing elsewhere than in England and Wales).	City of Coventry.	County of Warwickshire.	TOTAL.
A. Number of cases from each area dealt with during the year for the first time and found to be suffering from:—			
Syphilis ... ..	128	22	150
Soft chancre ... ..	...	...	...
Gonorrhœa ... ..	134	34	168
Conditions other than venereal ... ..	62	13	75
TOTAL ... ..	324	69	393
B. Total number of attendances of all patients residing in each area ... ..	7840	1559	9399
C. Aggregate number of "In-patient days" of all patients residing in each area ... ..	287	30	317
D. Number of doses of Arsenobenzene compounds given in the:—(1) Out-patient Clinic (2) In-patient Department, to patients residing in each area...	1827 (1) 187 (2)	289 16	2116 203

E. Give the names of Arsenobenzene compounds used in the treatment of Syphilis and the usual initial and final doses ... ..

Stabilarsan, 3 gr. Final dose, 6 gr.  
 Sulphostab (Boots) 3 gr. Final dose, 6 gr.

F. State the amount and kind of treatment usually administered to a case of Syphilis of each of the types usually dealt with at the Treatment Centre ... ..

Seven injections of Stabilarsan commencing with 3 or 45 gr and then potass. iodide for three weeks, then rest for three weeks, then commence again and give five doses of stabilarsan 6 gr., then potass. iodide for three weeks followed by two months' rest and then five more doses of stabilarsan.  
 In serious syphilis I generally use tryparsamide 1 gr. 2 gr. and 3 gr. (seven doses).

G. State the nature of tests applied in deciding as to discharge of patients referred to in Item 5 on previous page ... ..

Always have three negative Wassermanns at intervals of three, six, and nine months after all treatments. I follow as far as possible the treatment and tests laid down by Col. Harrison at St. Thomas' Hospital.



# Maternity and Child Welfare

## **MATERNITY AND CHILD WELFARE.**

A consideration of how to produce a healthy and vigorous race leads first to the subject of eugenics. With human instincts and communal conventions as they are, ideal mating from the procreative viewpoint is by no means assured. While most will readily agree that procreation by mental defectives and like persons is strongly to be deprecated, beyond this public opinion does not go. As things are to-day, therefore, maternity and child welfare work is the most fundamental of public health activities. As far as is practicable, it is starting at the right end of the stick in preventive medicine.

This work proceeded during 1929 as in previous years.

### **Maternity and Child Welfare Act, 1918.**

The work in connexion with the local scheme under the above Act has continued throughout the year. This included :—

- (1) The visiting of children from birth to 5 years of age.
- (2) The work of the Municipal Welfare Centre with five afternoon sessions per week, at two of which a Medical Officer is present.
- (3) The provision of medical services at two and of nursing services at three quasi-voluntary Welfare Centres in the City.
- (4) The provision of dried milk for sale, or for free or part cost distribution in suitable cases.
- (5) The provision of a special ante-natal clinic thrice each month.
- (6) The provision for sale of maternity outfits.
- (7) The provision of maternity beds.
- (8) The provision of facilities for the nursing or hospital treatment of cases of Ophthalmia Neonatorum, Puerperal Fever and Puerperal Pyrexia.
- (9) The provision of facilities for convalescent home treatment for nursing mothers.
- (10) The provision of facilities for the dental treatment of expectant and nursing mothers and young children.
- (11) The provision of funds—in a small way—to assist in the boarding-out of children with their mothers (i.e., mothers' pensions).

### **Municipal Welfare Centre.**

Attendances at the Welfare Centre have continued to be large, save that during the first quarter of the year the attendances dropped owing to the prevailing influenza epidemic. The work

of the Centre has been conducted as in past years. The Centre is open five afternoons per week; also for two hours on Saturday mornings it is open for the sale of dried milk. Mothers receive instruction in all branches of mothercraft; babies are weighed and are examined as necessary by the presiding medical officer. A comprehensive record is kept of every child attending the Centre.

Various leaflets giving information on such subjects as infant diet, prevention of infectious diseases, etc., are widely distributed.

Maternity outfits have again been provided for those requiring them, 34 being sold during the year.

By arrangement with the Education Committee, girls between the ages of 13 and 14 years, who are selected to take a domestic science course at one of the Elementary Schools, attend for one session at the Municipal Welfare Centre as part of their training; 136 girls attended the Centre in groups of 3 or 4 during the year.

The following figures show the number of attendances of mothers and babies at the Municipal Welfare Centre, Barracks Square :—

Total number of individual cases who attended	2,210
Total number of attendances of mothers and babies (a mother and baby are counted as one)	21,014
Average attendances per week	423.3
Total number of new babies attending during the year	2,091

#### DOCTOR'S CONSULTATIONS.

(These figures are included in the totals above).

Total number of cases seen	902
Total number of consultations	1,389

#### Assisted Voluntary Centres.

The Voluntary Societies assisting in the Maternity and Child Welfare work of the City continued their useful activities at the three centres below mentioned, viz. :—

(a) Stoke Heath Welfare Centre, held at Wyken Way every Wednesday. The Assistant Medical Officer of Health attends once a fortnight and a Health Visitor once a week.



(b) Holbrook Lane Welfare Centre, held at Corporation Cottages on alternate Wednesdays. The Assistant Medical Officer of Health and a Health Visitor attend once a fortnight.

(c) Longford Infant welfare Centre, held once a fortnight on alternate Thursdays, at the Drill Hall, Hurst Road, Longford. A Health Visitor attends each session. (Dr. Webster is the presiding doctor).

The following figures have been supplied very kindly by the Honorary Secretaries of the three Voluntary Centres above mentioned :—

*Longford Centre.*

No. of sessions at the Centre	...	...	23
No. of new cases attending	...	...	84
No. of attendances of mothers	...	...	744
No. of attendances of children	...	...	788

*Stoke Heath Centre.*

No. of sessions at the Centre	...	...	35
No. of new cases attending	...	...	108
No. of individual cases attending	...	...	132
No. of attendances of mothers	...	...	2,007

*Holbrook Lane Centre.*

No. of sessions at the Centre	...	...	23
No. of new cases attending	...	...	90
No. of individual cases attending	...	...	150
No. of attendances of mothers	...	...	939
No. of attendances of children	...	...	1,072

The hut wherein the Stoke Heath Centre is held is in a dilapidated condition and alternative premises are urgently required.

## **Ante-Natal Clinic.**

An ante-natal clinic was held twice a month at the Municipal Welfare Centre, Barracks Square, until September, when it was found necessary to increase the number of sessions to three per month. Mr. S. A. Ballantyne, a Gynæcological Specialist, attended and held 799 consultations.

Of the 499 cases seen, 123 were maternity bed cases booked for the Gulson Road Hospital and 256 for the Coventry and

Warwickshire Hospital. 39 were sent by midwives; 76 came of their own accord, and 5 were sent by medical men.

The urine was tested in all cases on their first visit and subsequently as necessary.

Six of the cases were referred to the Coventry and Warwickshire Hospital for immediate treatment; of these, four were sent to the Venereal Diseases Department and two for X-Ray examination. Two cases were sent to the Gulson Road Hospital for treatment before the confinement.

The following conditions were found among the patients examined, viz. :—Albumen, 1; Oedema of legs, 8; Tubercular Hip, 1; Varicose Veins, 18; Vaginal discharge, 4; Epileptic fits, 1; Persistent vomiting, 3; Rash, 4; Carious teeth, 7; Rheumatism, 1; Contracted Pelvis, 2; Varicose Ulcers, 1; Pyorrhœa, 1; Fibroid, 2; Hernia, 2; Congenital Heart, 1; Appendicitis, 2; Tuberculosis, 1.

The total number of attendances at Mr. Ballantyne's Clinic was 499.

The average attendance per session was 18.

#### Other Ante-Natal Work (Health Visitors).

Total number of individual cases seen ...	...	897
Total attendances ...	...	979
Average attendance per week ...	...	19

#### Maternity Beds.

The arrangements with the Coventry and Warwickshire Hospital and the Gulson Road Hospital in respect of maternity beds remained the same as in previous years. The number of applications for beds was considerably larger than in any former year.

The following figures refer to maternity cases for both of the institutions. There were 87 cases waiting at the beginning of the year, and 369 were booked during the year. Of the 342 cases admitted, 217 went to the Coventry and Warwickshire Hospital and 125 to the Gulson Road Hospital.

The following table sets out the information concerning home conditions, etc., as supplied by expectant mothers at the time of applying for a maternity bed :—

Small house (2 rooms only) ... ..	10
In house, but no convenience (overcrowding) ...	5
Unable to get adequate help in the house ...	70
Illness or for medical reasons ... ..	47
Living with relatives ... ..	28
In rooms, 1 bedroom and sharing sitting room...	14
In lodgings: 1 combined room ... ..	59
„ 2 rooms ... ..	127
„ 3 rooms ... ..	4
In domestic service ... ..	1
Insanitary condition of house ... ..	1
House sub-let, to inconvenience of tenant ...	1
Husband unemployed ... ..	1

### Convalescent Home Treatment for Mothers.

A few cases of mothers who remained very poorly after their confinement were referred to the Maternity and Child Welfare Committee for convalescent home treatment.

Ten were sent for an appropriate period to St. Mary's Convalescent Home, Birchington-on-Sea, and were able to take their infants with them.

In all cases the health of the mothers improved considerably by their treatment at the Home.

### Dental Treatment.

The facilities for dental treatment of expectant or nursing mothers and of children under 5 years have been made use of to a limited degree. Three nursing mothers applied for extractions and dentures; the Maternity and Child Welfare Committee agreed to contribute a portion of the cost in each case.

Dental treatment for young children between the ages of 3 and 5 years has been continued at the School Clinic by the permission of the Education Committee. Thirty-nine children were sent from the Infant Welfare Centre and treated by the School Dentists, who reported that the work involved was as follows:—

Referred for treatment ... ..	39
Actually treated ... ..	34
Treatment completed ... ..	34
Attendances ... ..	47
Fillings—temporary ... ..	13
Extractions ... ..	51
Local anæsthetic (times used) ... ..	34
Other operations ... ..	1

## **Orthopædic Treatment.**

During the year, nine orthopædic cases were ascertained amongst the children attending the Municipal Welfare Centre, viz. : 4 cases of torticollis, 3 of talipes, and 2 of Erb's palsy. Of these, three cases were referred for treatment to the Crippled Children's Guild and six cases were kept under observation.

During 1929, the Guild performed the following services in respect of Maternity and Child Welfare Committee cases, viz. :—

Twelve children under 5 years of age were given appropriate treatment over varying periods. Two of them received minor operative treatment, one underwent X-Ray therapy, and one was supplied with surgical appliances. Two children were sent to the Manfield Orthopædic Hospital, and were under treatment in that Institution for 5 months and 3 months respectively.

## **Home Visiting.**

First visits paid by Health Visitors to mothers numbered 2,258. These visits are timed to take place within two weeks of the birth of the baby or after the midwife or doctor has ceased to attend.

## **Revisits.**

During the first twelve months frequent re-visits are made to the infant, more especially to the poorly ones, and when necessary the mother is urged to get medical advice. The number of re-visits to children up to one year of age was 7,901, and 10,137 visits were made in respect of children between the ages of one and five years. This, together with first visits and re-visits makes a total of 20,296.

In addition to routine visiting of children from birth to five years and of expectant mothers, the Health Visitors also visit in connexion with ophthalmia neonatorum, phthisis, and puerperal pyrexia.

## **Transferred Births.**

The names and addresses of 147 infants and young children who left the City were notified to the Medical Officers of Health of the areas of destination, and 44 infants' names were notified as having come to live in the City.

## Notification of Births Act.

During the year 582 notifications of live births occurring in their practices were received from doctors, 1,855 from midwives, and 2 births were notified by parents.

## Still Births.

Under the Births and Deaths Registration Act, 1926, the registration of still-births became compulsory as from July 1st, 1927.

During 1929 the number of still-births registered was 97; of these, 60 were registered upon a doctor's certificate and 37 upon a midwife's certificate. 89 of these were notified under the Notification of Births Act, 1907.

The number of still-births is approximately 4 per cent. of the total births notified.

BIRTHS VISITED DURING THE YEAR 1929. Total number, 2,258.

	Totals.	Percentage.
Kind of feeding—		
(1) Entirely breast-fed .. ..	1891	83·8
(2) Hand and breast-fed .. ..	67	2·9
(3) Entirely hand-fed ... ..	253	11·2
(4) Unclassified ... ..	47	2·1
Kind of food—(when hand-fed)—		
(1) Fresh cow's milk and water	169	52·8
(2) „ „ and barley water	21	6·5
(3) „ „ with Patent Foods	19	5·9
(4) Dried Milk ... ..	86	26·9
(5) Condensed Milk ... ..	23	7·2
(6) Biscuits, bread-sop, etc. ...	2	0·7
Class. of house : rent—		
(1) Up to 10/- ... ..	382	17·0
(2) Above 10/- ... ..	1832	81·1
(3) Unclassified ... ..	44	1·9
Houses found overcrowded ..	633	28·0

## Supervision of Midwives.

Of the 59 midwives who notified their intention to practise in 1929, 3 have acted only as maternity nurses, while 3 did not practise. There were thus 53 midwives in actual practice in the City at the year-end. Of these, 50 were trained and 3 untrained.



The number of births attended by midwives was 1,721, or 70.5 per cent. of the total number of births registered.

During the year, 107 visits were made to midwives by the Superintendent Health Visitor for the purpose of inspecting books, bags, instruments, etc., and of making enquiry into cases of infectious illness in their respective practices.

It is satisfactory to note that the equipments of the midwives were found to be clean and orderly, and that their registers and records were found to be systematic and up-to-date.

The figures show that 2,036 cases have been attended during the year; of these, 91 occurred outside the City area and 1,945 within the City. Of these, 224 were doctors' cases, where a midwife was also in attendance. Thus 1,721 cases were attended by midwives alone.

The following notifications were received from midwives practising in the City:—

(1) Still-births	...	...	...	39
(2) Artificial feeding	...	...	...	29
(3) Liability to be a source of infection	...	...	...	6
(4) Notification of death	...	...	...	13

(1) **Still-births.**—17 Macerated, 20 not macerated, 2 doubtful.

#### PERIOD OF GESTATION.

6 months.	7 months.	8 months.	9 months.
2	8	5	24

#### PRESENTATIONS.

Vertex.	Breech.	Face.	Hand.	Not stated.
31	3	2	2	1

(2) **Artificial Feeding.**—Reasons of recourse to artificial feeding:—

Amputation of breast	...	...	...	1
By doctor's orders	...	...	...	2
Inverted nipples	...	...	...	4
Poverty of mother's milk	...	...	...	14
At patient's request	...	...	...	5
Mammary abscess	...	...	...	1
Illness of baby	...	...	...	2



(3) **Liability to be a source of infection :—**

Rise of Temperature? Sepsis...	...	...	3
Septicæmia	...	...	2
Measles	...	...	1

(4) **Notifications of Death.**—No maternal and 13 infant deaths. All of these were deaths of infants one week old or under, 6 being less than 24 hours.

**Advising Medical Assistance.**

Medical aid forms sent in by midwives during the twelve months numbered 606. The causes for sending for medical help were as follows :—

<i>For the Mother.</i>	<i>For the Child.</i>
During pregnancy :—	Inflammation of Eyes ... .. 92
Hæmorrhage ... .. 15	Debility or Feebleness ... .. 28
Albuminuria ... .. 13	Premature Infant... .. 17
Œdema ... .. 9	Death ... .. 13
Illness during Pregnancy ... 8	Deformity ... .. 12
Persistent Vomiting ... .. 6	Other Causes .. .. 6
Threatened Abortion ... .. 5	Rash ... .. 5
Purulent Discharge ... .. 2	Circumcision ... .. 4
Cloudy Urine ... .. 2	Jaundice ... .. 3
Contracted Pelvis ... .. 1	Convulsions ... .. 3
Sugar in Urine ... .. 1	Tongue-tied ... .. 3
Varicose Veins ... .. 1	Asphyxiated ... .. 2
During labour or the lying-in :—	Blind ... .. 1
Prolonged Labour ... .. 123	Hernia ... .. 1
Lacerated Perineum . ... 111	Spina Bifida ... .. 1
Hæmorrhage ... .. 13	
Adherent Placenta and	
Membranes ... .. 13	
Breech Presentation ... .. 13	
Illness of Mother ... .. 12	
Abnormal Presentation ... 10	
Rise of Temperature . ... 10	
Abortion or Miscarriage ... 7	
Other causes ... .. 7	
Pain in Leg ... .. 6	
Uterine Inertia ... .. 6	
Premature Birth ... .. 6	
Collapse ... .. 5	
Mammary Abscess ... .. 3	
Prolapse of Cord ... .. 2	
At the patient's request ... 2	
Varicose Veins ... .. 1	
Twin Birth ... .. 1	
Placenta Prævia ... .. 1	
Total <u>415</u>	Total <u>191</u>

# Maternal Mortality.

COVENTRY.—Maternal Deaths; No. of Births Registered; Deaths of Mothers per 1,000 Children Born in the 12 years, 1918—1929.

	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929
Puerperal Fever ...	3	5	4	2	2	4	2	7	4	3	2	3
Abortion... ..	1	1	—	—	—	1	2	—	3	3	—	3
Puerperal Nephritis ...	—	1	1	—	—	—	1	—	—	2	—	—
Hæmorrhage of Pregnancy ...	—	1	—	1	1	—	—	—	—	—	—	—
Ectopic Gestation ..	2	—	—	—	1	—	—	—	—	—	1	—
Other Accidents of Pregnancy	—	—	—	3	—	—	—	—	—	1	—	1
Puerperal Hæmorrhage ...	1	2	—	—	—	—	1	1	1	—	2	—
Other Accidents of Childbirth	7	4	2	10	—	1	2	1	—	1	3	2
Puerperal Embolism ...	—	—	—	2	—	1	1	1	2	—	1	—
Puerperal Convulsions ...	1	—	1	—	2	2	—	—	—	—	2	1
No. of MATERNAL DEATHS ...	15	14	8	18	6	9	9	10	10	10	11	10
No. of Births ... ..	2766	2486	3250	2836	2442	2317	2113	2178	2116	2065	2827	2434
Deaths of Mothers per 1,000 Births ... ..	5.42	5.63	2.46	6.34	2.45	4.06	4.25	4.59	4.72	4.84	4.72	4.10

## **Puerperal Fever and Puerperal Pyrexia.**

Fifteen cases of Puerperal Fever were notified, and three deaths were registered as due to this disease.

Twenty-three cases of Puerperal Pyrexia were notified, and three other cases primarily notified as Pyrexia were subsequently notified as Fever, under which they are included.

In connexion with these notifications, four requests were made by the medical men notifying, that the cases should be admitted to Hospital, four for a second medical opinion, and in two cases bacteriological assistance was requested for the examination of the lochia. The assistance required was supplied in all cases.

During the year arrangements were continued with the two local nursing associations for the services of their District Nurses to be available for the nursing of cases of these diseases if required.

Six cases of Puerperal Fever and thirteen of Puerperal Pyrexia were treated in hospital, and two other cases of the latter received nursing attention.

## **Ophthalmia Neonatorum.**

Eight notifications of this condition were received during the year. Of these cases, seven made a complete recovery and one infant died before treatment was complete. All cases were nursed at home.

## **Epidemic Diarrhœa.**

No death was registered as due to epidemic diarrhœa or infective enteritis; 17 cases were certified as due to diarrhœa and enteritis; of these, 6 were due to gastro-enteritis, 5 to enteritis, 4 to colitis, and 1 each to dyspepsia and cœliac disease. Of the total, 10 were under two years of age.

## **Registration of Nursing Homes.**

Under the provisions of the Nursing Homes Registration Act, 1927, there are registered in the City :—

Maternity Homes	...	...	13
Nursing Homes	...	...	2

One application for the registration of a maternity home was received at the end of the year, and this was approved in January, 1930.

### Children Act, 1908.

The Superintendent Health Visitor, Miss Cureton, was appointed by the Guardians as Visitor under Part I. of this Act, and the following is a copy of her 1929 report in respect of this work :—

“I beg to submit a report on work done under Part I. of the Children Act during the year ended December 31st, 1929. The visiting under the above Act proceeded normally during the year.

Up to August 1929, the work was done by my predecessor—Miss Barratt—since when I have been responsible for it.

Cases on books on January 1st, 1929...	...	42
New cases during the year	...	23
Total cases for 1929	...	65
Children legally adopted	...	3
„ returned to their mothers	...	10
„ having died during the year...	...	1
„ over the age of seven	...	6
Total cases removed	...	20
Cases remaining on the books December 31st,		
1929	...	45

Two foster mothers were found totally unsuitable for the work, and new foster mothers had to be found for the children concerned.

One foster mother was prosecuted for failing to notify and also for refusing to notify that she was acting as such.

During the past year all cases have been visited, in some cases on many occasions.

Many of the foster mothers have brought the children on my advice to the Municipal Welfare Centre, where I have had further opportunity of inspecting them and giving advice.”

### Classification of visits made by Health Visitors.

	1928	1929
Notified Births visited ... ..	2,148	2,258
Re-visits to Notified Births (to infants under 12 months). ... ..	7,283	7,901
Re-visits to Notified Births (to children up to 5 years). ... ..	11,309	10,137
Ante-natal Visits { First ... ..	386	310
{ Subsequent ... ..	102	85
Still-borns inquired into ... ..	2	—
Infants' Deaths inquired into ... ..	3	1
Tuberculosis visits ... ..	1,550	1,340
Other Infectious Diseases visited ... ..	50	32
Visits to Midwives ... ..	92	107
Visits to Mentally Deficient Cases... ..	299	413
Miscellaneous visits . ... ..	152	188
Total	23,376	22,772
Nuisances reported . ... ..	80	52
Dirty, etc., houses found ... ..	24	9

# Sanitary Circumstances



## SANITARY CIRCUMSTANCES.

### Rivers and Streams.

The small river Sherbourne traverses the City from west to east. Its waters are polluted in various ways, although surface water is of course the only form of drainage which is knowingly allowed to enter. Much of the pollution is caused by offenders who cast refuse into the stream, but everything possible is done to suppress this undesirable practice. Under the direction of the City Engineer the course of the stream through the town is periodically cleared and cleansed. Extensive works are now in progress along its banks in the low-lying portions of the City, with the object of preventing the flooding which has been so troublesome from time to time in the past.

### Drainage and Sewerage.

The original Whitley sewage works are now used as storm-water works only. The later Baginton sewage farm began to function in 1901 and the sewage is pumped up to the farm from Whitley. The dry-weather flow to Baginton is some  $5\frac{1}{2}$  million gallons daily. The present treatment of sewage is (a) as to  $2\frac{1}{2}$  million gallons daily, by broad irrigation; (b) as to  $1\frac{1}{2}$  millions by bacteria beds; and (c) as to  $1\frac{1}{2}$  millions by bio-aeration ("activated sludge").

The arrangements for sewage disposal outlined above will ere long be altered extensively. The Corporation have embraced a new scheme, and in this connexion work is already in progress on the new site at Finham. The site is to be equipped with 20 bacteria beds. The completion of the new scheme will enable a discontinuation of land treatment at Baginton, although the bacteria beds and activated sludge plant there will continue to operate.

Certain small sewage works at Canley and Stoke came into the City at the 1928 boundary extension, while a very small out-lying portion of the City drains into the sewage works of the Foleshill Rural District Council.

### Water.

Particulars as to the sources of the public water supply have been given in previous Reports.

The City Water Manager has kindly supplied the following information :—

“ During the twelve months, 1,588,067,000 gallons of water have been supplied from the public sources; of this, 331,996,687 gallons were supplied from Spon End, and 695,970,000 gallons from Shustoke, whilst 288,513,540 gallons have been supplied from Whitley, these being the main sources of supply.

Of the total amount it is estimated that 1,437,954,000 gallons were used in the City; a daily average of 3,939,600 gallons, or 23.45 gallons per head per day. 826 new services have been laid on to build and supply 1,544 houses and 25 other buildings; guarantees have been received for 1,428 houses and 104 various completed buildings, in which are included 1,763 water-closets and 1,341 new baths.

There follow the tabulated results of water analyses made during the year :—

### Results of Analyses expressed in parts per 100,000.

#### SHUSTOKE.

	Free and Saline Ammonia.	Organic Ammonia.	Chlorine in Chlorides.	Nitrogen in Nitrates and Nitrites.	Oxygen absorbed in Four Hours at 80° F.	Total Solid Matter.	Hardness.			Remarks.
							Temporary.	Permanent.	Total.	
1	0.0042	0.0052	2.4	0.05	0.066	34.8	11.5	10.5	22.0	Satisfactory
4	0.0012	0.0074	2.5	0.04	0.052	33.2	13.0	10.5	23.5	Do.
4	0.0020	0.0070	2.6	0.08	0.086	36.8	12.0	10.0	22.0	Do.
3	0.0020	0.0050	2.5	0.08	0.061	44.0	12.5	11.5	24.0	Do.
3	0.0016	0.0040	2.7	0.12	0.060	36.8	12.0	11.0	23.0	Do.
3	0.0016	0.0042	2.7	0.08	0.061	35.6	9.0	13.0	22.0	Do.
3	0.0012	0.0052	2.7	0.08	0.022	34.2	10.0	11.5	21.5	Do.
2	0.0012	0.0048	2.6	0.04	0.055	21.6	8.5	8.0	16.5	Do.
2	0.0038	0.0048	2.6	0.05	0.034	26.4	9.0	8.0	17.0	Do.
7	0.0034	0.0086	2.5	0.12	0.071	29.6	9.0	10.5	19.5	Do.
4	0.0022	0.0038	2.6	0.12	0.055	27.6	9.5	10.0	19.5	Do.
4	0.0020	0.0050	3.5	0.16	0.112	30.6	8.5	10.5	19.0	Do.

#### DOEBANK WELL, SPON END.

2	0.0012	0.0026	2.1	0.06	0.008	48.6	13.5	17.0	30.5	Satisfactory
6	0.0008	0.0016	2.2	0.08	0.004	48.6	14.5	16.0	30.5	Do.
6	0.0012	0.0016	2.2	0.04	0.004	18.6	15.0	16.5	31.5	Do.
1	0.0012	0.0024	2.2	0.04	0.004	50.0	15.5	16.5	32.0	Do.
8	0.0012	0.0024	2.3	0.01	0.008	50.2	17.5	16.0	33.5	Do.
5	0.0016	0.0030	2.2	0.02	0.008	49.8	16.0	17.5	33.5	Do.
4	0.0012	0.0022	2.3	0.04	0.008	49.0	16.0	16.5	32.5	Do. Slight traces of small fibres
1	0.0012	0.0040	2.3	Trace	0.008	49.2	17.5	16.5	31.0	Satisfactory
1	0.0006	0.0030	3.2	0.04	0.004	50.0	17.5	16.0	33.5	Do. Slight traces of small fibres
9	0.0016	0.0072	2.1	0.40	0.015	48.8	16.5	17.0	33.5	Do. Nitrate figure higher than usual
6	0.0010	0.0020	2.2	0.16	0.004	48.0	17.0	18.0	35.0	Do. Slight traces of small fibres
4	0.0012	0.0014	2.0	0.12	0.019	46.4	17.5	17.5	35.0	Satisfactory

# "NORTH WARWICKSHIRE" WATER SUPPLY.

(This water is also used for districts outside the City within the Corporation's area of supply).

Date of Receipt of Sample.	Free and Saline Ammonia.	Organic Ammonia.	Chlorine in Chlorides.	Nitrogen in Nitrates and Nitrites.	Oxygen absorbed in Four Hours at 80° F.	Total Solid Matter.	Hardness.			Remarks.
							Temporary.	Permanent.	Total.	
Dec. 31 1929.	0.0012	0.0012	2.0	Trace	0.004	40.8	15.0	16.5	31.5	Satisfactory
Feb. 4	Trace	0.0016	2.2	„	0.008	43.0	15.5	17.5	33.0	Do.
Mar. 4	0.0008	0.0020	2.1	0.04	0.004	43.6	15.0	17.0	32.0	Do.
April 8	Traces	0.0020	2.0	Traces	0.008	46.4	15.5	17.0	32.5	Do.
May 6	0.0004	0.0016	2.0	Trace	0.008	48.2	14.5	17.5	32.0	Do.
June 3	Trace	0.0020	2.0	„	0.008	43.0	15.5	17.0	32.5	Do.
July 3	0.0008	0.0020	2.0	„	0.004	42.6	15.0	18.0	33.0	Do.
Aug. 12	0.0008	0.0020	2.2	Nil	0.004	40.0	19.5	19.5	39.0	Do.
Sept. 2	0.0008	0.0028	2.0	Trace	0.004	43.2	18.0	18.5	36.5	Do.
Oct. 7	0.0008	0.0024	1.9	„	0.004	48.0	17.5	18.0	35.5	Do.
Nov. 4	Traces	0.0008	2.0	Traces	0.004	42.4	18.5	17.0	35.5	Do.
Dec. 2	Nil	0.0008	2.1	Trace	0.004	41.0	18.0	17.5	35.5	Do.

## TANK, SPON END.

Date of Receipt of Sample.	Free and Saline Ammonia.	Organic Ammonia.	Chlorine in Chlorides.	Nitrogen in Nitrates and Nitrites.	Oxygen absorbed in Four Hours at 80° F.	Total Solid Matter.	Hardness.			Remarks.
							Temporary.	Permanent.	Total.	
1929.										
Jan. 2	0.0022	0.0030	2.0	0.12	0.008	44.4	14.5	17.0	31.5	Satisfactory
Feb. 6	0.0008	0.0028	2.2	0.04	0.015	45.8	15.0	16.0	31.0	Do.
Mar. 6	0.0016	0.0028	2.1	0.04	0.008	45.8	14.5	17.0	31.5	Do.
April 11	0.0016	0.0044	2.1	0.04	0.030	47.0	16.0	16.5	32.5	Do. Traces of small part
May 8	0.0016	0.0030	2.2	0.04	0.011	46.8	17.0	16.0	33.0	Do. Few small fibres
June 5	0.0016	0.0022	2.2	0.02	0.008	47.2	16.5	17.5	34.0	Satisfactory
July 4	0.0028	0.0026	2.3	0.04	0.011	47.6	16.0	16.5	32.5	Do. Traces of small fibr
Aug. 14	0.0008	0.0030	2.2	Trace	0.004	40.6	17.5	16.0	33.5	Do. Do.
Sept. 4	0.0024	0.0024	2.0	0.04	0.004	45.0	17.0	15.0	32.0	Do. Do.
Oct. 9	0.0012	0.0024	2.2	0.32	0.004	45.0	17.0	17.5	34.5	Satisfactory
Nov. 6	0.0030	0.0034	2.0	0.04	0.015	44.4	17.0	17.0	34.0	Do. Traces of small soli and f
Dec. 4	0.0012	0.0026	2.0	0.08	0.004	44.6	16.0	16.5	32.5	Satisfactory

## WHITLEY.

1929.										
Jan. 2	0.0016	0.0016	4.1	0.16	0.004	71.0	19.0	23.0	42.0	Satisfactory
Feb. 6	0.0008	0.0030	4.2	0.12	0.004	73.4	21.0	21.0	42.0	Do.
Mar. 6	0.0012	0.0020	4.3	0.16	0.004	73.4	22.5	21.5	44.0	Do.
April 11	0.0008	0.0016	4.1	0.12	0.008	70.0	20.5	22.0	42.5	Do.
May 8	0.0008	0.0024	4.2	0.12	0.011	66.8	21.0	21.5	42.5	Do.
June 5	0.0012	0.0024	4.1	0.04	0.004	74.4	17.5	22.5	40.0	Do.
July 4	0.0024	0.0046	4.0	0.20	0.004	69.6	20.5	24.0	44.5	Do.
Aug. 14	0.0008	0.0028	4.1	0.12	0.008	68.0	24.5	25.0	49.5	Do.
Sept. 5	0.0008	0.0042	4.3	0.12	0.004	71.0	23.0	24.5	47.5	Do.
Oct. 9	0.0012	0.0034	4.1	0.44	0.004	74.0	22.5	20.5	42.5	Do.
Nov. 6	0.0008	0.0012	4.0	0.12	0.004	70.2	25.0	21.5	46.5	Do.
Dec. 5	0.0010	0.0026	4.1	0.16	0.004	63.0	22.5	21.0	43.5	Do.

## CLOSET ACCOMMODATION.

	January, 1929.	December, 1929.	
Total number of water closets in houses, institutions, schools, factories, and workshops in the City ... ..	43,864	45,627	These figures must be regarded as ap- proximate only
Number of privy middens ... ..	136	130	
Number of pail-closets ... ..	321	* 323	

\* This increase is due to pails being substituted  
for a privy midden in an unsewered district.

## SCAVENGING.

The use of removable galvanised iron dustbins is practically general for the home storage of refuse at the 40,124 houses in the City. Approximately 42,451 of these are in use at the present time, and there remain only 115 fixed ashpits.

## SANITARY INSPECTION OF DISTRICT.

That portion of the work of the Health Department connected with nuisances in and around dwellings can best be set out in tabular form. The figures in relation to these matters for the year are as follows :—

DRAINAGE AND PAVEMENT.	1928.	1929.
Drains opened and cleansed from obstruction	384	382
Drains provided with efficient traps ...	19	14
New Drains, inspection and intercepting chambers provided ... ..	40	57
Drains relaid ... ..	28	28
Sink drains disconnected from sewer ...	3	3
Soil pipes and ventilating shafts provided or improved ... ..	6	4
Rain-water pipes disconnected from the sewer ... ..	4	3
Courts and back yards paved and repaired	29	29
DWELLINGS.		
Floors of dwellings relaid or repaired ...	82	116
Dilapidated walls and ceilings repaired ...	234	253
Damp walls—damp courses inserted ...	5	41
Roofs repaired and made weatherproof ..	374	396
Dangerous stairs repaired ... ..	19	20



DWELLINGS— <i>continued</i> .	1928.	1929.
Additional windows provided and others repaired and made to open ...	183	111
Defective spouts repaired ...	119	159
Pantry ventilation improved ...	3	...
Houses provided with food stores ...	2	2
New sinks provided ...	15	8
New waste pipes provided and others repaired	24	20
Foul cellars cleansed and defects in drains remedied ...	5	8
Houses limewashed and cleansed ..	223	255
Houses cleansed after infectious disease	185	106
Cases of overcrowding remedied ...	11	37

## WATER CLOSETS AND URINALS.

Additional water closets provided ...	48	24
Water closets reconstructed ...	18	8
Water closets repaired and limewashed ...	158	294
Water closets provided with new basins and traps ...	118	163
Water closet pans replaced with pedestals	48	75
Defective joints in flush pipes repaired ...	42	84
Foul W.C. basins and traps cleansed ...	127	63
Defective W.C. cisterns repaired ...	132	219
New flushing cisterns provided ...	95	149
Urinals cleansed and reconstructed ...	8	20
Urinals abolished ...	3	4

## PRIVIES, ASHPITS AND DUSTBINS.

Offensive privies or pail closets converted into W.C.'s ...	2	3
Offensive privies or pail closets abolished ...	...	4
New W.C.'s erected in place of above ...	...	4
Offensive ashpits abolished ...	11	18
Sanitary dustbins provided in place of above ...	26	42
Other houses provided with sanitary dustbins ...	668	890

## VARIOUS.

Smoke nuisances dealt with ...	28	41
Nuisances from animals kept, abated ...	45	41
Offensive accumulations removed ..	144	181
Courts and back yards cleansed by tenants ...	74	72
Gipsy tents and caravans removed ...	23	28
Water supply—additional taps provided...	34	3
Miscellaneous ..	595	756

Totals	4,444	5,238
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So far as the work is capable of tabulation, the number of visits and other work involved is shown in the following table :—

	1928.	1929.
Number of visits to premises ... ..	29,910	35,740
Number of informal notices issued respecting nuisances ... ..	2,358	2,706
Number of letters issued ... ..	3,775	3,627
Number of cleansing notices (statutory) issued ... ..	217	195
Number of statutory notices issued respecting nuisances ... ..	43	52
Number of nuisances remaining unabated ... ..	12	5
Number of summonses issued for non-compliance with notice to abate nuisance ... ..	1	1
Number of registered premises under supervision (not including workshops) ... ..	591	1,053*
Number of visits paid to registered premises ... ..	4,393	4,174
Number of visits <i>re</i> Infectious Diseases ... ..	2,478	1,247

## Canal Boats.

Mr. Martin, the Inspector under the Canal Boats Acts, furnishes the following information, which shows the steps taken by the Sanitary Authority to give effect to the Acts and Regulations affecting Canal Boats :—

Total number of Boats registered to 31st December, 1929	519
Boats added to register in 1929 ... ..	5
Registrations cancelled ... ..	209
Actual number of Boats on register on 31st December, 1929	310
Number of Boats inspected in 1929 ... ..	231
Number of Boats conforming to the Acts and Regulations	198
Number of Boats infringing the Acts and Regulations ...	33
Total number for which the Cabins were registered ...	74 <sup>1</sup>
Total number occupying the Cabins ... ..	53 <sup>1</sup>

### *Details of Occupations :—*

Male Adults ... ..	211
Female Adults ... ..	134
Children of School Age ... ..	106
Children under School Age ... ..	80

\* This figure includes bottled milk shops.



No. of Cases met with.	<i>Details respecting infringements.</i>				No. of Cases remedied.
7	Absence of Certificate	...	...	...	5
1	Painting	...	...	...	—
6	Ventilation	...	...	...	5
14	Dilapidation	...	...	...	8
4	Without Pump	...	...	...	3
1	No proper water vessel	...	...	...	1
—					—
33	Total cases met with.	Total cases remedied			22
—					—

### SANITARY CONDITION OF THEATRES, MUSIC HALLS, &c.

In accordance with the requirements of the Ministry of Health's Circular (No. 120), an inspection of the sanitary conditions of the twenty-one theatres, music halls and places of public entertainment in the district has been made, and reports submitted to the Public Health and Watch Committees.

#### References to other Departments.

These included 279 references to the City Engineer, 293 to the Waterworks Manager, 2,399 to the Head Teachers of the Schools with duplicates to the Education Department, 2,399 to parents, and 397 to the City Librarian.

The character of the references to the City Engineer is set out in the following table :—

Dangerous buildings	...	...	...	33
Unauthorised buildings	...	...	...	20
Foul gullies and complaints relating to sewers	...	...	...	90
Refuse removal	...	...	...	73
Miscellaneous	...	...	...	63

The references to the Waterworks Manager dealt with such matters as waste of water from taps and cisterns; those to Head Teachers, Parents and Education Department related to Infectious Diseases among school children and exclusions from school, and those to the City Librarian concerned infected homes and library books.

## MAGISTERIAL PROCEEDINGS IN 1929.

No. of Case.	Complaint.	Result.	Total Costs.		
			£	s.	d.
1	Non-compliance with notice to abate nuisance arising from the damp condition of rear wall of house due to absence of an eaves gutter ..	Order made for notice to be complied with forthwith and owner fined £1.	1	0	0
2	Contravention of Article 9 of the Public Health (Meat) Regulations, viz.:—failing to notify to the Local Authority that the carcase and organs of a sheep after slaughter appeared to be diseased or unsound .. ..	Fined £25	25	0	0
3	Contravention of Section 73 of the Public Health Act, 1925, viz.:—distributing toys in exchange for rags and bones	Fined 15/-	15	0	
4	Contravention of Section 73 of the Public Health Act, 1925, viz.:—distributing toys in exchange for rags and bones	Fined 5/-	5	0	
5	Contravention of Article 31 (2) of the Milk and Dairies Order, 1926, viz.:—bottling milk otherwise than on registered premises, viz.: in the public street .. ..	Fined £2	2	0	0
6	Contravention of Section 116 of the Public Health Act, 1875, viz.:—exposing unsound rabbits for sale intended for the food of man, in the public street .. ..	Fined £10	10	0	0
7	Contravention of Section 116 of the Public Health Act, 1875, viz.:—exposing unsound rabbits for sale intended for the food of man, in the public street .. ..	Fined £10	10	0	0
8	Contravention of Article 21 of the Public Health (Meat) Regulations, viz.:—conveying meat in a dirty vehicle and failing to take reasonable precautions to prevent the exposure of the meat to contamination .. ..	Fined £5	5	0	0
TOTAL			£54	0	0

Among the above magisterial proceedings are two cases where proceedings were taken under Section 73 of the Public Health Act, 1925, which prohibits the distribution of toys by rag and bone dealers in exchange for rags, etc. For assistance in enforcing this provision the Department is indebted to the Chief Constable and his staff.

# Summary of Inspectors' Work

IN CONNECTION WITH THE SUPPRESSION OF NUISANCES FOR THE PAST TEN YEARS.

	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	Totals.
No. of drains opened and cleansed from obstruction	361	390	306	239	301	320	317	313	384	382	3,313
" drains provided with efficient traps	36	16	33	20	8	7	24	13	19	14	190
" new drains provided to premises	54	27	26	34	28	27	43	62	68	85	454
" sink drains disconnected from the sewer	4	3	3	3	...	...	...	1	3	3	17
" new sinks provided and others repaired	143	98	61	33	21	39	37	31	39	28	530
" floors and walls of houses repaired	506	471	417	286	222	198	285	398	316	369	3,468
" roofs of houses repaired and made weatherproof...	341	279	371	209	155	306	238	264	374	396	2,933
" defective spouts repaired	244	189	253	174	132	139	128	168	119	159	1,705
" houses limewashed and cleansed	528	595	341	229	183	242	168	227	223	255	2,991
" houses cleansed after infectious disease	137	114	111	157	126	199	88	117	185	106	1,340
" offensive privies or pail closets converted into water closets	2	1	...	...	...	5	...	2	2	3	15
" offensive privies or pail closets abolished	4	3	...	...	...	...	...	...	...	4	11
" new water closets erected in place of above	4	3	...	...	...	...	...	...	...	4	11
" additional new water closets provided	10	4	4	9	5	10	9	29	48	24	152
" water closets provided with new cisterns...	49	35	18	19	30	22	33	97	95	149	547
" " " new basins and traps	204	449	152	62	65	96	102	80	118	163	1,491
" foul water closet drains cleansed	210	286	166	84	86	29	47	50	127	63	1,148
" defective W.C. cisterns, etc., repaired	610	396	538	250	279	290	308	294	350	605	3,920
" offensive ashpits abolished...	4	1	3	2	...	2	11	1	11	18	53
" sanitary dustbins provided in place of the above	4	6	17	4	...	4	49	5	26	42	157
" " " to other premises	594	729	608	489	335	556	581	676	668	890	6,126
" urinals cleansed, repaired and reconstructed	24	12	7	6	3	2	11	12	8	20	105
" courts and backyards paved and repaired	102	96	111	23	28	30	39	39	29	29	526
" nuisances from animals kept, abated	89	181	163	50	45	55	34	39	45	41	742
" accumulations of manure, etc., removed	80	99	105	77	57	80	81	155	144	181	1,059
" smoke nuisances dealt with	8	4	7	15	23	18	27	46	28	41	217
" cases of overcrowding dealt with	8	14	10	7	7	2	5	10	11	37	111
" vent and soil pipes removed or replaced, and											
" miscellaneous sanitary improvements effected	873	1276	663	379	360	421	541	743	1,004	1,127	7,387
	5,233	5,774	4,404	2,860	2,499	3,099	3,206	3,872	4,444	5,238	40,710

# Summary of other Miscellaneous Work

FOR THE PAST TEN YEARS.

87

	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929
No. of visits and re-visits to premises ...	23,543	32,991	28,388	19,556	15,824	21,244	23,887	25,871	29,910	35,740
" drains tested ...	141	95	76	59	62	50	78	109	95	106
" visits respecting Infectious Diseases ...		...	...	1,042	1,453	2,650	1,835	1,684	2,478	1,247
" notices issued for abatement of nuisances, including informal and statutory ...	2,884	2,743	2,865	1,901	1,689	1,787	1,995	2,042	2,401	2,768
" letters " ...	1,372	2,185	2,127	2,230	2,458	2,602	2,609	3,013	3,775	3,627
" nuisances remaining unabated after expiration of notice ...	36	45	31	21	24	22	28	14	12	5
" summonses issued for non-compliance with notices served to abate nuisances ...	2	6	7	0	6	0	0	1	1	1
" registered premises under supervision ...	431	452	531	630	652	504	458	473	591	1,053*
" visits paid to registered premises...	1,675	1,659	2,198	1,848	1,163	1,976	2,749	3,503	4,393	4,174
" references to City Engineer ...	415	236	159	313	158	231	174	188	235	279
" references to Water Manager ...	20	225	299	147	143	84	199	65	223	293
" references to Education Department ...	448	635	704	1,389	1,350	4,693	1,584	1,841	2,504	2,399

\* This figure includes bottled milk shops.

## PREMISES AND OCCUPATIONS CONTROLLED BY BYE-LAWS OR REGULATIONS.

### **Common Lodging Houses.**

Number on Register, January, 1929	...	3
„ added to the Register during the year	...	0
„ removed from the Register during the year	... ..	0
„ remaining on the Register, December, 1929	... ..	3

These houses are registered to accommodate 86, 23 and 36 male lodgers respectively.

Number of visits during the year	... ..	120
Number of contraventions observed	...	7

The contraventions observed related to :—Dirty condition of rooms and bedding and foul or defective condition of water-closets.

### **Houses Let in Lodgings.**

Number on Register, January, 1929	...	49
„ added to Register	... ..	1
„ discontinued	... ..	—
„ on Register, December, 1929	...	50
„ of visits during the year	... ..	329
„ of contraventions observed	...	42

The contraventions observed related to :—Dirty condition of rooms and yard surfaces; foul, defective, or insufficient water-closets; overcrowding; ventilation and limewashing.

### **Offensive Trades.**

#### **Fish Fryers.**

Number on Register, January, 1929	...	120
„ of applications received for permits	...	7
„ „ „ approved	...	4
„ „ „ disapproved	...	3
„ discontinued during the year	...	16
Total number on Register, December, 1929	...	108

#### **Tripe Boilers.**

Number on Register	... ..	11
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**Hide and Skin Dealers.**

Number on Register	...	...	...	...	3
--------------------	-----	-----	-----	-----	---

**Rag and Bone Dealers.**

Number on Register	...	...	...	...	3
--------------------	-----	-----	-----	-----	---

**Gut Scraper.**

Number on Register	...	...	...	...	1*
--------------------	-----	-----	-----	-----	----

**Tallow Melter.**

Number on Register	...	...	...	...	1
--------------------	-----	-----	-----	-----	---

**Bone Boiler.**

Number on Register	...	...	...	...	1
--------------------	-----	-----	-----	-----	---

**Visits.**

Number of visits paid during the year	...	...	224
---------------------------------------	-----	-----	-----

**Contraventions.**

Number observed relating to "absence of suitable receptacles for refuse, accumulation of refuse, and the cleansing of floors and walls"...	...	14
--	-----	----

\* During the year one Gut Scraper has been taken off the Register, the business having been discontinued.

**Factories, Workshops and Workplaces.**

The following tables are inserted in compliance with Section 132 of the Factory and Workshop Act, 1901 :—



## I.—INSPECTION.

Including inspections made by Sanitary Inspectors.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories .. .. . (Including Factory Laundries).	131	32	..
Workshops .. .. . (Including Workshop Laundries).	239	14	..
Workplaces .. .. . (Other than outworkers premises included in Part 3 of this Report).	288	3	..
TOTALS .. .. .	658	49	..

## 2.—DEFECTS FOUND

Particulars.	Number of Defects			Number of Prosecu- tions.
	Found.	Remedied.	Referred to H.M. Inspector	
<i>Nuisances under the Public Health Acts :—*</i>				
Want of cleanliness .. .. .	10	10	..	..
Want of ventilation .. .. .	4	4	1	..
Overcrowding .. .. .	..	..	..	..
Want of drainage of floors .. .. .	..	..	..	..
Other nuisances .. .. .	2	2	1	..
Sanitary accom- modation	insufficient .. .. .	9	9	..
	unsuitable or defective..	22	22	..
	not separate for sexes ..	2	2	..
<i>Offences under the Factory and Workshop Act :</i>				
Illegal occupation of underground bake house (s. 101) .. .. .	..	..	..	..
Breach of special sanitary requirements for bakehouses (ss 97 to 100) .. .. .	10	10	..	..
Other offences .. .. . (Excluding offences relating to outwork which are included in Part 3 of this Report)	..	..	..	..
Totals .. .. .	59	59	2	..

\* Including those specified in Sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

## 4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year.						Number.
Important classes of workshops, such as workshops in bakehouses are enumerated here.	Bakers .. .. .					49
	Sugar Boilers .. .. .					2
	Watch Makers .. .. .					21
	Dressmakers .. .. .					18
	Tailors .. .. .					53
	Boot Makers and Repairers .. .. .					24
	Milliners .. .. .					20
	Joiners and Carpenters .. .. .					9
	Cabinet Makers .. .. .					12
	Cycle Repair Shops .. .. .					3
	Ironmongers and Smiths .. .. .					5
	Plumbers and Painters .. .. .					5
	Gas Fitters and Bellhangers .. .. .					1
	Pattern Makers and Brassfounders .. .. .					2
	Saddlers .. .. .					3
	Tinworkers .. .. .					8
	Picture Framers .. .. .					2
	Laundries .. .. .					—
	Box and Bag Makers .. .. .					1
	Printers and Bookbinders .. .. .					1
	Card Stampers .. .. .					—
	Engravers, etc. .. .. .					—
	Marine Store Dealers .. .. .					2
	Coach Builders and Wheelwrights .. .. .					6
	Various .. .. .					115
Total number of workshops on Register						357

## 5.—OTHER MATTERS.

Class.	Number.
Matters notified to H.M. Inspector of Factories :	
Failure to affix Abstract of the Factory and Workshop Act (s. 133), 1901.. .. .	0
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5), 1901 .. .. .	36
Notified by H M. Inspector	
Reports (of action taken) sent to H.M. Inspector ..	36
Other .. .. .	0
Underground Bakehouses (s. 101) :—	
Certificates granted during the year .. .. .	0
In use at the end of the year .. .. .	0

**Bakehouses.**

Number on Register, December, 1928	...	90
„ dispensed with during the year	...	2
„ of Bakehouses unoccupied	...	18
„ of changes of occupancy	...	1
„ of Bakehouses opened during the year	—	
„ of Bakehouses on Register, December, 1929	... ..	88*
„ of visits	... ..	117
„ of contraventions observed	...	17
„ of contraventions remedied	...	17

The contraventions observed related to the limewashing of walls and ceilings, and to dirty floors.

\* This number includes Factory Bakehouses.

**Outworkers.****HOME WORK.**

Lists have been received from 8 employers with respect to 32 outworkers. Of these, 9 were employed in the making of wearing apparel, and 23 in the making of textile fabrics; 31 outworkers resided in the City, and 1 outside; particulars of the latter were reported to the Authority concerned.

An inspection was made of 5 of the home premises of those outworkers residing in the City who had been shown on the returns as employed in the making of wearing apparel and textile fabrics, and the premises were found to be satisfactory.

**RATS AND MICE DESTRUCTION ACT, 1919.**

Mr. Martin, the Executive Officer under this Act, reports as follows :—

No. of rat-infested premises under observation, December, 1928	... ..	186
„ „ complaints received during the year	... ..	190
„ „ visits	... ..	166
„ „ re-visits	... ..	535
„ „ poison baits laid by the Staff of the Public Health Department	... ..	2,422
„ „ poison baits laid in sewers	... ..	1,140

No. of tins of poison supplied to occupiers of premises...	43 <sup>2</sup>
„ „ instances where smoke and sulphur were applied to rat runs ... ..	20
„ „ notices sent requiring premises to be made rat- proof ... ..	14
„ „ rat runs from defective drains sealed up and defects in drains remedied ... ..	13
„ „ premises made rat-proof ... ..	4
„ „ cases where some improvement was reported ...	33
„ „ instances where, on subsequent inspection, premises were reported to be free from rats ...	59
„ „ rat-infested premises under observation at the close of the year ... ..	317
„ „ carcasses or tails of rats for which awards were paid at the Refuse Destructor ... ..	6,283

In all cases where premises are found to be infested with rats, a leaflet issued by the Ministry of Agriculture, explaining methods of rat destruction, is supplied to the occupier.

## Smoke Abatement.

Complaints were received during the year concerning excessive smoke and dust emitted from chimneys at twenty factories. In addition excessive smoke was observed by the Sanitary Inspectors to be emitted from chimneys at twenty-five other factories.

Four hundred and eighty-one observations were made. In 29 cases a letter of caution or a notice was served.

In many instances an improvement has been effected by interviewing works engineers and stokers, who have courteously received Inspectors, and have willingly adopted the suggestions made by them with a view to the minimization of smoke.

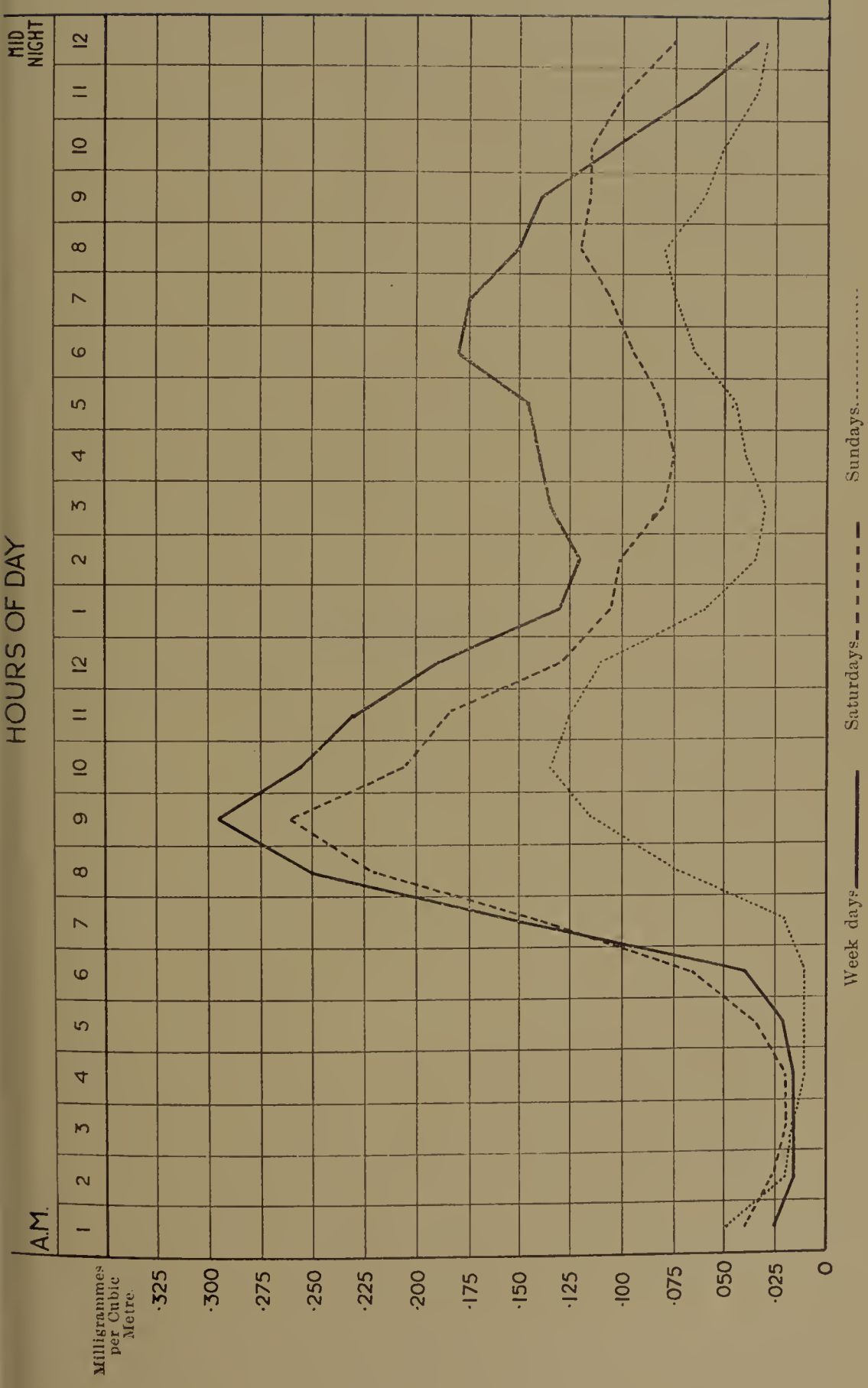
As a result of action taken by the Inspectors, it is satisfactory to report that in forty-one instances a marked improvement was observed in regard to the quantity of smoke emitted.

During the year a printed copy of the Smoke Abatement By-law was addressed, with a covering letter, to the owners of 61 factories in the City, and it can be reported that many consequential enquiries were addressed to the Chief Sanitary Inspector, asking for advice on the subject. Such advice was gladly accorded.

The Smoke Abatement Advisory Council for the Midlands held regular meetings during 1929, and their deliberations and recommendations were supplied to the various Authorities concerned.

### **Atmospheric Pollution.**

Aerial pollution in Coventry is probably less than that obtaining in most industrial cities of similar size. The extensive use of electricity for power in modern works is the most important contributory factor in this connexion. Nevertheless there are many smoke-emitting factories. In respect of the latter, smoke abatement measures need to be so applied that at least there is no lowering of the present standard of aerial cleanliness. This is done, but it is not enough. It is improvement we look for, and to this end modern plant and scientific stoking can do much. It is a platitude to state that excessive smoke denotes financial waste. On grounds of public service and of economy, therefore, the minimization of smoke should be the concern of every industrialist. The householder cannot be absolved of responsibility in the matter of smoke production. The collective smoke output of large numbers of houses is capable of serious atmospheric pollution. This, the greater use of gas and electricity in the home, is capable of reducing.







# Housing

## HOUSING.

In this city, as in all large centres of population throughout the country, housing remains the most pressing public health and social problem of the day. There is nothing which influences man so profoundly—whether it be mentally, physically or morally—as does his home. The child in particular reacts to early environment; his social outlook and his state of health are not infrequently determined by home experiences long before influences outside the home can operate. In short, decent housing, permitting of wholesome home-life, is essential to social adjustment and to communal health.

The housing position in Coventry has been rendered particularly difficult by reason of the phenomenal increase in population commenced during the war and continued since. The Corporation have given of their best in so far as concerns the provision of new houses. Council houses are allotted to “suitable” tenants. It is in the interpretation of the word “suitable” that the public health worker and the housing administrator do not see eye to eye. By the former, the word is applied to families who urgently need re-housing because their present environment is prejudicial to health. By the housing administrator, the term “suitable” is applied to those families seeking Council dwellings, who can well and regularly pay the rent demanded therefor. These two views are irreconcilable, for those very families whose existing environment is worst are most embarrassed financially—they would not be found in such surroundings else. A defect in our social fabric is the present inability to move such families to decent homes. To provide the latter at a rental suited to the worker of meagre income and large family, would appear impossible save by recourse to subsidizing or to frank philanthropy.

Owing to the absence of alternative accommodation for displaced tenants, it has only been possible during the year to make Closing Orders under the appropriate section of the 1925 Housing Act, in respect of two unfit houses, although there are more ripe for closure.

### RECONDITIONING.

The difficulties outlined above in respect of providing new houses and of closing unfit ones, go to emphasise the importance

of reconditioning existing properties occupied by the less fortunate members of the community. Much has been accomplished during the year on these lines. Hitherto the course adopted has been to effect necessary and pressing improvements by means of the Public Health Act, 1875. In this connection, Section 3 of the 1925 Housing Act might be invoked to advantage. This Section can be of the greatest utility, its outstanding virtue being the power conferred on the Corporation to do work in default.

# Housing and Town Planning Acts, 1909 & 1925.

The following Table summarises the action which was taken under this Act, and the results which have followed:—

Year.	Houses inspected by Housing Inspector.	Number of representations made to Local Authority, with a view to the making of Closing Orders.	Number of Houses considered by Local Authority.	Number of Closing Orders made.	Number of dwelling-houses, of which the defects were remedied without the making of Closing Orders.	Number of dwelling-houses, of which, after the making of Closing Orders, were put into a fit state for human habitation.	Number of Closing Orders rescinded.	Number of dwelling-houses voluntarily closed.	Number of Demolition Orders made.	Number of Houses Demolished.
1910	24	24	24	24	1	4	..	..	1	2
1911	212	114	114	92	..	5	5	3	3	7
1912	44	107	107	29	11	34	34	2	36	21
1913	91	107	107	87	47	10	..	..	10	50
1914	116	91	91	54	17	16	15	..	19	38
1915	25	20	20	20	..	25	16	..	7	21
1916	2	2	2	..	..	13	13	..	..	6
1917	..	..	..	..	..	..	..	..	..	..
1918	..	..	..	..	..	..	..	..	..	..
1919	33	33	33	3	..	..	..	..	..	..
1920	..	..	..	..	..	..	..	..	..	..
1921	..	..	..	..	..	..	..	..	..	..
1922	..	..	..	..	..	..	..	..	..	..
1923	..	..	..	..	..	..	..	..	..	4
1924	..	..	..	..	..	..	..	..	..	..
1925	..	..	..	..	..	..	..	..	..	..
1926	..	..	..	..	..	..	..	..	..	17
1927	2	2	..	2	..	..	..	..	..	2
1928	..	..	..	..	..	..	..	..	..	..
1929	2	2	2	2	..	..	..	..	..	..
..	551	502	502	313	76	107	83	5	76	168

Of the 168 houses demolished, 76 were pulled down after Demolition Orders had been made; and in the remaining 92 cases, although Closing Orders had been made, Demolition Orders were uncalled for since the houses were razed for other purposes, viz. (1) For the improvement of adjoining houses; (2) To clear the site for new buildings, and (3) For Factory extensions. In each case, however, demolition was the result of action taken under the Housing Acts.

The total number of houses demolished in the 20 years 1910-29, was 914.

The two houses demolished during 1927, were pulled down after Closing Orders had been made, without the necessity for Demolition Orders.

The Housing Director kindly provides the following information concerning new houses :—

NUMBER OF NEW HOUSES ERECTED DURING THE YEAR :—

(a) Total	...	...	...	...	...	1,566
(b) With State assistance under the Housing Acts :—						
(1) By the Local Authority	...	...	...	...	...	292
(2) By other bodies or persons	...	...	...	...	...	1,088

The following information is supplied at the request of the Ministry of Health :—

1. UNFIT DWELLING HOUSES.

*Inspection—*

(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	...	...	...	...	...	1,733
(2) Number of dwelling houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925	...	...	...	...	...	2
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	...	...	2
(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	...	...	...	...	...	442

2. REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICES.

Number of defective dwelling houses rendered fit, in consequence of informal action by the Local Authority or their Officers	...	...	...	...	...	325
--	-----	-----	-----	-----	-----	-----

3. ACTION UNDER STATUTORY POWERS.

*A. Proceedings under Section 3 of the Housing Act, 1925 :—*

(1) Number of dwelling houses in respect of which notices were served requiring repairs	...	...	...	...	...	Nil
(2) Number of dwelling houses which were rendered fit after service of formal notice :—						
(a) By owners	...	...	...	...	...	Nil
(b) By Local Authority in default of owners	...	...	...	...	...	Nil



- (3) Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close ... Nil

*B. Proceedings under Public Health Acts—*

- (1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied ... .. \*103
- (2) Number of dwelling houses in which defects were remedied after service of formal notice :—
- (a) By owners ... .. 89
- (b) By Local Authority in default of owners ... Nil

\* This figure represents actual structural alterations to houses and does not include matters dealt with merely as nuisances.

*C. Proceedings under Sections 11, 14 and 15 of the Housing Act, 1925 :—*

- (1) Number of representations made with a view to the making of Closing Orders ... .. 2
- (2) Number of dwelling houses in respect of which Closing Orders were made ... .. 2
- (3) Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having been rendered fit ... .. Nil
- (4) Number of dwelling houses in respect of which Demolition Orders were made ... .. Nil
- (5) Number of dwelling houses demolished in pursuance of Demolition Orders ... .. Nil

The City Engineer kindly provides the following information :—

PLANS APPROVED.										
Year ending 30th Nov.	Houses.	Factories and Workshops	Alterations and Additions.	Miscellan's	Public Buildings.	Churches.	Chapels.	Schools.	Streets.	Totals.
1905	523	33	69	50	1	0	0	1	8	685
1906	1116	55	45	64	4	0	1	2	26	1313
1907	1275	70	45	105	1	0	1	4	35	1536
1908	1084	16	42	94	2	1	1	0*	17	1257
1909	1030	40	54	111	1	1	0	2	4	1243
1910	1205	34	62	141	2	0	1	2	30	1477
1911	1386	40	62	147	8	0	0	2	5	1650
1912	622	69	102	140	3*	0	0	3	16	955
1913	1236	75	98	113	7	0	0	1*	15	1545
1914	1189	43	91	118	2	1	0	4	3	1451
1915	510	77	46	119	2*	2	0	0*	6	762
1916	163	75	55	86	1	0	0	0	2	382
1917	287	69	34	46	3	0	0	0	8	447
1918	71	41	27	50	0	0	0	0	0	189
1919	126	63	54	272	2*	0	0	0	1	518
1920	686	55	55	308	0	0	0	0	2	1106
1921	36	20	84	122	0	0	0	6	0	218
1922	127	27	51	141	1	0	1	0	1	349
1923	403	39	42	121	0	1	0	1	3	615
1924	539	23	32	246	0	0	0	2	2	844
1925	1159	33	49	203	1	0	0	1	3	1449
1926	1037	21	61	205	0	0	0	0	40	1364
1927	869	23	90	281	0	2	1	4	7	1277
1928	1228	31	112	217	6	1	1	0	15	1611
1929	1479	27	116	239	2	0	0	0	23	1886

BUILDINGS COMPLETED.										
1905	378	14	14	11	2	0	0	1	6	426
1906	728	34	7	16	2	0	0	2	13	802
1907	1010	48	20	32	2	0	0	1	18	1131
1908	1188	26	21	44	2	0	2	1	7	1291
1909	1169	32	28	49	5	0	0	1	14	1298
1910	959	45	20	61	2	0	0	0	13	1100
1911	1211	39	46	66	4	1	0	4*	19	1390
1912	894	67	53	99	2	0	0	0	5	1120
1913	838	67	60	80	12	0	0	4*	10	1071
1914	927	32	56	82	1	2*	0	1	14	1115
1915	785	46	50	85	2	0	0	1	7	976
1916	418	49	27	26	2*	1	0	1	8	532
1917	176	62	24	19	1	0	0	0	3	285
1918	251	29	9	5	0	0	0	0	0	294
1919	125	42	21	83	1	0	0	0	0	272
1920	277	55	27	103	0	0	0	0	6	468
1921	367	22	11	52	0	0	0	6	9	467
1922	223	11	20	85	1	0	0	1*	7	348
1923	122	15	25	131	0	0	1	0	5	299
1924	324	16	20	206	0	0	2	1	4	573
1925	536	13	31	134	0	1	0	1	30	746
1926	877	20	51	176	0	0	0	1	21	1146
1927	1328	18	65	247	0	0	0	0	7	1665
1928	1128	25	98	253	4	0	2	3	23	1536
1929	1611	25	111	252	2	1	1	0	16	2019

\* The total of 1479 houses for which plans have been approved comprises :—

1180 houses for Private Enterprise.  
 286 " " the Corporation Housing Schemes.  
 13 " " the Re-housing Scheme in connection with the Street Schemes.  
 1479

† The total of 1611 houses completed comprises :—

1280 houses for Private Enterprise.  
 292 " " the Corporation Housing Schemes.  
 39 " " the Re-housing Scheme in connection with the Street Schemes.  
 1611

## Overcrowding.

During the year, out of 45 cases of overcrowding, in which application was made for a Corporation dwelling, 14 were relieved: in 5 cases a Corporation house was allotted, and in 9 instances a house other than Corporation property was found for the applicants.

Below are particulars of typical cases of overcrowding encountered and dealt with during the year:—

1. The house contained one living room and two bedrooms. One of the bedrooms, of 730 cubic feet capacity, was sub-let, and was occupied by a sub-tenant and his family, comprising a man, wife, two sons aged 3 years and 8 months respectively, and one daughter aged 4 years.
2. The house contained one living room and one bedroom. The bedroom, of 854 cubic feet capacity, was occupied by a man, wife, daughter aged 15 years, and three sons aged 13, 9 and 7 years respectively.
3. The house contained one living room and two bedrooms. One of the bedrooms, of 1,168 cubic feet capacity, was sub-let, and was occupied by a sub-tenant and his family, comprising a man, wife, two sons aged 9 and 6 years respectively, and three daughters.
4. The house contained one living room and two bedrooms. One of the bedrooms, of 1,141 cubic feet capacity, was sub-let, and was occupied by a sub-tenant and his family, comprising a man, wife, one son aged 6 years, and three daughters aged 4, 2, and one year respectively, and in addition a female adult. (Relative).
5. The house contained two living rooms and two bedrooms. One of the bedrooms, of 788 cubic feet capacity, was occupied by a man, wife, and one son aged 6 years. The other bedroom, containing 357 cubic feet, was occupied by four sons aged 19, 18, 13½, and 12 years respectively, and one daughter aged 16 years.
6. The house contained one living room and one bedroom. The bedroom, of 1,475 cubic feet capacity, was occupied by a man, wife, two sons aged 18 and 11 years respectively, and three daughters aged 16, 14, and 5 years respectively.
7. In one instance a room, being one of the rooms in a House-let-in-Lodgings, and containing 960 cubic feet, was occupied as a combined living and sleeping room by a man, wife, and five sons aged 13, 7, 3½ years, and twins aged 15 months.

## Food Supplies

## FOOD SUPPLIES.

### Milk.

The milk supply during the year 1929 averaged 5,311 gallons per day, and the supply fully met the demand during the whole of the year.

The quantity of milk produced within the City does not appear to have varied to any great extent, and is now estimated at about 1,400 gallons per day.

Considerably more than half of the total quantity of milk now consumed in the City is delivered in bottles, the greater portion being either "Pasteurised" or "Sterilised."

### Graded Milk.

There are but three firms in the City holding licences under the Milk (Special Designations) Order, 1923, viz. :—

One firm for the sale of "Certified Milk," and "Grade A (Tuberculin Tested) Milk." The other two firms for the production and sale of "Pasteurised Milk."

### Samples for Tubercle Bacilli.

During the year 38 specimens of milk from purveyors selling milk in the City were submitted to the Birmingham University for examination, and in six instances tubercle bacilli were found; particulars of these are set out hereunder.

Of the six samples containing tubercle bacilli, two were taken from mixed milk produced at a farm in the City, and four from mixed milk produced at three dairy farms situated in the County.

A veterinary examination was made of the herds at each of the farms concerned, with the following results :—

**Farm A.** Two suspicious cows were found, and a sample of milk from each was examined, with the result that in one sample living tubercle bacilli were found, and in the other sample tubercle bacilli were not found. The animal producing the infected milk was slaughtered. A control sample of the mixed milk from the herd was then examined, and this was found to be satisfactory.

**Farm B.** In this case two cows were found to be affected with tuberculosis. These were removed from the herd and slaughtered. A control sample of the mixed milk from the remaining cows was obtained and examined. No tubercle bacilli were found in this sample.

**Farm C.** At this farm a suspected cow was slaughtered and found to be affected with advanced tuberculosis. The carcase and

all the organs were destroyed. The control sample of mixed milk taken from the remaining cows in the herd was found to be satisfactory.

**Farm D.** Nine samples of milk from nine suspected cows were taken in this instance, and in no case were tubercle bacilli found. It was ascertained, however, that after the initial sample had been obtained from the dairyman in the City, the farmer had sold three of the herd for slaughter, and it is possible that one of these was giving tuberculous milk, as there were no tubercle bacilli found in the control sample obtained subsequently.

### Samples for Bacterial Count.

Seven samples of milk were also submitted to the Pathological Department of the Birmingham University for bacterial count, with the following results :—

				<i>Result.</i>	
No. 1.	"Grade A" milk	...	...	91,550 organisms per c.c. of milk	
No. 2.	"Pasteurised" milk	...	...	299,400	" "
No. 3.	"	"	...	48,000	" "
No. 4.	"Sterilized"	"	...	0	" "
No. 5.	"Grade A"	"	...	585	" "
No. 6.	"Pasteurised"	"	...	1,270	" "
No. 7.	"	"	...	22,375	" "

### Purveyors of Milk.

		Dec., 1928.	Dec., 1929.
Number of names on the Register of			
Retail Purveyors	...	334	397
(a) Residing in the City	...	293	289
(b) ,, outside the City		41	108
Number of names on the Register of			
wholesale traders and producers			
(not selling by retail)	...	59	70
Number of inspections made during			
the year	...	337	366

Forty-three contraventions were observed relating to :—

Persons trading as milk purveyors while unregistered.

Conveyance of milk in dirty vehicles.

Failure to have name and address inscribed on vehicle or can.

Milk churns kept in unsuitable places.

Failure to maintain milk store in reasonable state of cleanliness.

Milk being bottled otherwise than on registered premises.

Removing caps from bottles and selling milk therefrom in small quantities.



Thirteen written notices were issued and 30 verbal cautions given in connection with the above-mentioned contraventions, and in one instance magisterial proceedings were instituted. (See tables relating to magisterial proceedings).

In 5 instances a cessation of the sale of loose milk from general stores was secured. In four of these stores bottled milk is now sold.

### **Character of business carried on by Milk Vendors.**

Sale of loose milk from Shops :—

(a) Where Dairy Produce only is sold	...	10 shops
(b) Where Confectionery and Milk are sold	16	„
(c) Where the business of a General Store is carried on	...	101 „

Sale of milk from private dwelling-houses without rounds ... 4

Sale of milk from private dwelling-houses with rounds ... 59

Sale of milk on rounds only ... 207

Of the 207 vendors who sell milk on rounds, 108 reside outside the City Boundary.

Bottled milk is now sold from 459 shops.

From the above figures it will be seen that the number of shops from which loose milk is sold is decreasing, whilst the demand for bottled milk is becoming greater.

### **Production, Conveyance and Distribution.**

#### *Cowkeepers.*

Number of cowkeepers on register, January, 1929	51
„ „ „ discontinued during the year	2
„ „ „ on register, December, 1929	49
„ „ visits paid during the year	145

The 145 visits made during the year were in connexion with 54 cowsheds at 22 farms.

Of the 54 cowsheds examined, 5 only were found to comply with the full requirements of the Milk and Dairies Order, the remaining 49 falling below that standard.

Defects of the following nature were noted, viz. :—

Light and ventilation insufficient.

Walls, floors and channels defective or dirty.

Drainage insufficient.

Water supply absent or insufficient

Approaches to cowsheds not suitably paved and drained.

Accumulations of manure in the vicinity of cowsheds.

Twenty-two informal notices were addressed to the cow-keepers concerned, and it is pleasing to report that as a result of this action 87 improvements were effected, viz. :—In 20 cases additional light and ventilation were provided; in 11 cases new floors, channels and drains were provided or improved; in connexion with 10 cowsheds the approaches were paved and drained; in 9 instances stalls and mangers were improved, and in 37 cases improvements were carried out in respect to limewashing, cleansing and removal of manure.

From the foregoing it will be seen that a further attempt has been made during the past year to improve the conditions under which milk is produced at farms in the City, but owing to pressure of work it is impossible for the present staff of Inspectors to devote as much time to this important class of work as is necessary if the cowsheds are to be raised to a reasonable standard.

#### MILK AND DAIRIES ORDER, 1926.

Mr. Dale, the Veterinary Inspector appointed in connexion with the work under this Order, reports as follows :—

“ I beg to report that I have inspected all the milking cows in the City of Coventry during the past year (1929).

There are at present about 600 cows, most of which are in milk and the remainder lying off. I found the cows generally satisfactory. Some are very lean, which may have been owing to the shortage of grass in the Summer and Autumn. One cow, which was dry, has since calved, and as she was showing symptoms of Tuberculosis, she was sent to the knackers. There were several cases of indurated quarters from various causes; none, however, was tuberculous.

Three of the cowkeepers are at present purchasing milk owing to their cows being dry.

The cows as a whole were kept cleaner than previously, though there is still room for improvement in that respect.”

## Meat Supplies.

Two thousand nine hundred and thirty-two visits have been made to the slaughter-houses in order to inspect meat, and to enforce the byelaws relating to such premises.

The number of carcasses examined at slaughter-houses by Sanitary Inspectors who are qualified Meat Inspectors, in addition to those carcasses notified by butchers as unsound, was as follows :—

Beef	...	...	...	...	2,018
Mutton and Lamb	...	...	...	...	1,820
Pork	...	...	...	...	783
Veal	...	...	...	...	158

Ninety contraventions were observed at the slaughter-houses relating to limewashing of walls, cleansing of floors, removal of offal, and absence of suitable receptacles for offal.

These contraventions were remedied.

It has not been necessary to institute proceedings under Section 117 of the Public Health Act, 1875, with regard to butchers' meat.

Notifications were received from 83 butchers, using 45 slaughter-houses, concerning the carcasses of 337 animals, viz. :— 31 bullocks, 129 cows, 66 heifers, 10 calves, 56 sheep, and 45 pigs, these being found after slaughter to be diseased or unsound.

The meat surrendered and destroyed in connexion with these notifications was estimated to amount to 13,691 lbs., and consisted of : Beef, 11,724 (of which 5,849 lbs. were tuberculous); mutton, 663 lbs.; pork, 953 lbs.; veal, 351 lbs.

(The tuberculous meat surrendered involved 127 carcasses or parts of carcasses).

The number of slaughter-houses in the district at different dates was as follows :—

Slaughterhouses.	January, 1929.	Total Dec., 1929.
Registered .. ..	17	17
Conditionally Licensed .. ..	23	23
Annually Licensed .. ..	11	10
* Unclassified .. ..	6	4
(Added Area)		
	57	51

\* These remain unclassified pending fuller information.

## PUBLIC HEALTH (MEAT) REGULATIONS, 1924.

During the past year 1,939 observations and visits have been made in connexion with markets, shops, stores, etc., in order to secure compliance with the above regulations.

Seventy-three contraventions were observed relating to :—

Failure to give the requisite notice of slaughter of an animal for sale for human consumption.

Failure to notify that the carcase or internal organs of an animal slaughtered for sale, for human consumption, appeared to be diseased or unsound.

Exposure of meat outside shops and stalls without reasonable steps being taken to guard against contamination of the meat.

Exposure of meat for sale for human consumption in a room without taking reasonable steps to guard against contamination.

Failure to limewash walls and ceilings of rooms used for the storage of meat.

Failure to provide properly covered receptacles to receive trimmings and refuse.

Conveyance of meat in, or on a vehicle, and not causing the meat to be adequately protected by means of a clean cloth, or other suitable material.

Removal of carcase before the expiration of three hours after slaughter.

Work other than the slaughtering and dressing of carcasses being done in a slaughterhouse.

Dirty utensils.

Shop from which meat was sold being inadequately ventilated.

Failure to have name and address painted or inscribed on stall.

Twenty-seven written notices were issued and forty-three verbal cautions given in connexion with these contraventions, and in two cases, magisterial proceedings were instituted.

(See table relating to magisterial proceedings.)

## SALE OF FOOD ORDERS, 1921.

The various shops, stores and markets have been visited from time to time in order to enforce the requirements of the Orders concerning the labelling of imported meat.

## PUBLIC ABATTOIR.

The position in regard to this question was fully set out in the Annual Report for 1928.

The new scheme for an extended Abattoir on the Butts site was adopted by the Council on January 9th, 1929. This provides for an Abattoir of the most up-to-date type, with facilities for the

whole of the butchers in the City, and includes :—(1) lairages; (2) slaughter halls; (3) cooling and chill halls; (4) a bye-products department; (5) a dead meat market with a frozen meat store underneath; (6) garage; (7) administrative offices and Superintendent's residence; and (8) a railway siding.

Negotiations during the year have been somewhat lengthy and involved, owing to the number of interests concerned. Sketch plans were prepared and a further Ministry of Health enquiry concerning the new site was held on May 3rd, 1929. The sanction of the Ministry was subsequently received. Detailed plans have since been prepared by the Architect, Mr. R. Stephen Ayling, and the project is going ahead. The reader is referred to the frontispiece, where a sketch of the future Abattoir appears.

#### PUBLIC HEALTH (PRESERVATIVES, ETC., IN FOOD) REGULATIONS, 1925-27.

These Regulations were made with the object of securing a purer food supply. They prohibit generally the manufacture and sale of articles of food to which have been added any injurious preservatives or colouring matter.

Certain articles of food, however, are allowed to contain preservative, provided (1) the preservative is one of those permitted by the Regulations, (2) that it is not in excess of the prescribed quantity, and (3) that the article bears a declaratory label.

Particulars of the articles of food submitted to the Public Analyst during the year will be found in the table relating to the Food and Drugs (Adulteration) Act.

Seven samples, namely, four of sausage, two of potted meat and one of custard powder, were found to contain preservative. The preservative found in the sausages was that permitted by the Regulations and not in excess of the prescribed quantity, the contravention being that declaratory notices were not conspicuously placed in the shops. The vendors in each case were cautioned.

The two samples of potted meat reported against were purchased from the same vendor—one informal and one formal. Each sample was found to contain sulphur dioxide, and the vendor was cautioned by order of the Public Health Committee.

The sample of custard powder contained a preservative slightly in excess of the amount allowed by the Regulations; the vendor is being kept under observation.



## Unsound Food.

The following quantities of unsound food have been surrendered from markets, shops and stores :—

88½ lbs. of imported meat (527 lbs. of beef, 191 lbs. of pork, 56 lbs. of mutton, 110 lbs. of veal); 157 tins of meat; 212 rabbits; 1 ham; 1 side of bacon; 6 cases of preserved eggs; 322 tins of fruit; 242 tins of tomatoes; 20 tins of baked beans; 112 tins of condensed milk; 159 tins of cream; 1 barrel of apples; 87 cwts. of vegetables; 10 bags of brussel sprouts; 3 tins of frozen eggs; 20 tins of tongue; 31 tins of fish; 161 cwts. 1 qr. 19 lbs. of fish; 26 cwts. of mussels.

## MANUFACTURE OF ICE CREAM.

The Coventry Corporation Act, 1911, contains clauses in regard to premises where ice-cream is manufactured, and requires the occupier of such premises to take reasonable precautions to guard against the contamination of ice-cream and the ingredients used in its manufacture.

It is not compulsory for a person who manufactures ice-cream to apply for his premises to be registered with the Local Authority.

A register is being compiled, and at present contains the names and addresses of 98 persons. Of these, 89 are makers of ice-cream, the remaining 9 being vendors only.

In 82 cases it was found on inspection that ice-cream was prepared in back kitchens; in 6 cases ice-cream was prepared in sheds or outbuildings; whilst in 2 cases the premises were merely receiving depôts for ice-cream which had been made in other towns.

In the course of the inspections particular attention is directed by the inspectors to such matters as lighting, ventilation, water supply, drainage and general cleanliness both of the utensils and the premises.

## FOOD AND DRUGS (ADULTERATION) ACT, 1928, AND REGULATIONS MADE UNDER PUBLIC HEALTH (REGULATIONS AS TO FOOD) ACT, 1907.

The following table shows the number and the nature of the articles submitted for analysis during the year :—



Articles.	Genuine.	Not Genuine.	Total.
New Milk ..	206	14	220
Condensed Full Cream Milk..	2	..	2
Condensed Machine Skimmed Milk .. ..	4	..	4
Cream .. ..	6	..	6
Butter .. ..	29	..	29
Margarine.. ..	13	..	13
Lard .. ..	10	..	10
Bread .. ..	1	..	1
Sponge Cakes ..	6	..	6
Custard Powder .. ..	3	1	4
Corn Flour .. ..	4	..	4
Cocoa .. ..	9	..	9
Beef Suet .. ..	5	..	5
Sweets .. ..	1	..	1
Oranges .. ..	1	..	1
Gin .. ..	2	..	2
Rum .. ..	2	..	2
Whiskey .. ..	2	..	2
Sausages .. ..	20	..	20
Potted Meat .. ..	2	2	4
Luncheon Sausage .. ..	2	..	2
Brawn .. ..	1	..	1
Ham and Chicken Roll ..	3	..	3
Salmon Roll .. ..	1	..	1
Salmon Paste .. ..	4	..	4
Beef Paste .. ..	1	..	1
Veal and Ham Roll .. ..	1	..	1
Liquorice Powder .. ..	6	..	6
Camphorated Oil .. ..	3	..	3
Glycerine .. ..	3	..	3
Boric Ointment .. ..	4	..	4
Olive Oil .. ..	4	..	4
Totals .. ..	361	17	378

The samples were collected in the following manner :—

Formal samples	...	...	...	144
Preliminary samples	...	...	...	234

*Milk.*—Of the 220 samples of new milk, 206 were found to be genuine and 14 adulterated. Of these, three were below the limit in solids not fat, in amounts varying from  $3\frac{1}{2}$  to 5 per cent. ; six were deficient in fat, varying in amounts from 3 per cent. to 46 per cent. ; four were found to contain added water, in amounts varying from 2 to 7 per cent. ; and one was suspicious of containing 8 per cent. of added water.

*Samples deficient in Solids not Fat.*—Of the three samples found to be deficient in solids not fat, one was a formal sample

obtained from a shopkeeper carrying on the trade of a general store. As the deficiency appeared to be due to the cows yielding very poor milk, the vendor was kept under observation, and further samples were obtained which were found to be genuine. The remaining two samples were informal or test samples purchased at general stores. In each case formal samples were subsequently obtained and these proved to be genuine.

*Samples deficient in Fat.*—With regard to the six samples found to be deficient in fat, two were informal and four formal. The informal and one of the formal samples were obtained from three separate shopkeepers selling from one to two gallons of milk daily; the three remaining formal samples were obtained from two dairymen. In the case of one shopkeeper and one dairyman, the deficiency was found to be due to improper mixing, and both vendors were cautioned by order of the Public Health Committee.

Formal samples were obtained from the other two shopkeepers and these were found to be genuine.

With regard to the remaining sample, the dairyman is being kept under observation.

*Samples containing Added Water.*—The four samples found to contain added water, were taken formally; one was obtained from a shopkeeper and three from dairymen. On the recommendation of the analyst, further samples were obtained in each case, and these were found to be genuine.

The vendor of the suspicious sample was kept under observation, and further samples obtained proved to be genuine.

All the samples were found to be free from preservatives and artificial colouring matter, and in no case was it found necessary to take action on account of the presence of dirt.

*Condensed Milk.*—The samples of condensed milk, in every case, complied with the Public Health (Condensed Milk) Regulations.

*Potted Meat.*—Of the four samples of potted meat, two were certified as genuine and two contained preservative. Of the latter, one was a formal and the other an informal sample; both were obtained from the same vendor, who was cautioned by order of the Public Health Committee.

*Custard Powder.*—Of the four samples of custard powder, three were found to be genuine, and one, an informal sample, was found to contain sulphur dioxide slightly in excess of the amount allowed. The vendor of this sample is being kept under observation.

*Oranges.*—The sample of oranges was submitted because the skins appeared to have been treated with a dye. It was found that they had been dyed with an acid aniline dye, which was not one of the dyes prohibited by the Food and Drugs (Adulteration) Act.

*Drugs.*—The Coventry Insurance Committee has instituted a scheme whereby they take periodical samples of drugs and appliances as supplied by local chemists to insured persons.

Mr. Lee Gordon, the Clerk to the Committee, has been good enough to allow access to the reports on the 15 drug samples taken during 1929. These reports were satisfactory in 14 instances.

## Other Services

## MENTAL DEFICIENCY ACT, 1913.

The following is from the Annual Report of the Mental Deficiency Act Committee for the year 1929 :—

“ The year 1929 has been especially notable in the history of the Mental Deficiency Service.

The Mental Deficiency Committee—a special joint Committee appointed by the Board of Education and the Board of Control—published its conclusions in regard to the problems presented by mental deficiency among children of school age and among the population generally. The inclusion of a report by Dr. E. O. Lewis on an investigation into the incidence of mental deficiency brought to light facts and figures of considerable interest to workers in the Social Services. The investigation was conducted in six selected areas in England and Wales, each area having a unit population of approximately 100,000. Three were urban, two rural, and one a mixed urban-rural area. The investigators spent three or four months in each area; and in the final section of the report an estimate is given of the calculated rates of incidence of mental defect (based on the figures ascertained by the inquiry) in England and Wales.

The following summary is taken from tables 10 and 11 of the Report :—

(1) **Estimated number of mentally defective persons in  
England and Wales.**

Sex.	Total Population.	No. of Persons.		
		Feeble Minded.	Imbeciles.	Idiots.
Males .. ..	18,804,000	114,904	28,806	7,397
Females .. ..	20,486,000	109,746	23,133	4,612
	39,290,000	224,650	51,939	12,009

(2) Estimated incidence of above figures as rates per 1,000 of the population.

Males .. ..	18,804,000	6.11	1.53	0.39
Females .. ..	20,486,000	5.36	1.13	0.23
	39,290,000	5.72	1.32	0.31

Following the publication of the reports, and in view of the possible effect of the Local Government Act, 1929, in regard to Mental Deficiency, the Board of Control supplied us with an estimate of the local requirements for institutional accommodation. This showed :—

- (1) No. of beds required prior to April 1st, 1929 ... 130
- (2) No. of beds required after April 1st, 1929,  
inclusive of Poor Law cases ... .. 279
- (3) Additional number of beds ... .. 149

We have had submitted to us a report showing the numbers and classification of all known mental defectives in the City. This showed at October 30th :—

	M.	F.	Total.
(1) No. on Special School Register ...	43	31	74
(2) No. on Register of Mental Defec- tives ... ..	99	96	195
(3) No. provided for by Board of Guardians ... ..	—	—	41
(4) No. under Voluntary Supervision	13	12	25
			<hr/> 335 <hr/>

The 195 cases on the Register of Mental Defectives were classified as follows :—

- (1) Feeble Minded ... .. 120
- (2) Imbeciles ... .. 53
- (3) Moral Imbeciles ... .. 8
- (4) Idiots ... .. 14

In addition to this—

6 of the above cases were epileptics.

2 „ „ „ „ blind.



The question of providing institutional accommodation was again reviewed but no progress was made. We had the privilege of being conducted over the Monyhull Colony for Mental Defectives at Birmingham during the summer, and were impressed with the work carried out there.

The number of cases of mental deficiency provided for or assisted by the Coventry Board of Guardians was carefully considered as a result of the Board of Control asking for our observations upon a series of sixteen names of mentally defective patients in the London Road Institution. A return kindly supplied by the Guardians showed that they were providing for forty-one certified defectives—21 were in various certified institutions, and 20 in their London Road Institution. These latter cases were examined and classified, but it was not possible to take further action in regard to them.

Turning now to the work of the year, we have again to note a steady increase in the numbers of mental defectives registered in the City. The following figures shew the position on December 31st, and for the year 1929 :—

No. of cases notified up to December			
31st, 1928	...	...	181
Less No. of those who were :—			
(1) Dead	...	...	10
(2) Left City	...	...	5
(3) Removed from Register			
upon recertification as			
lunatics	...	...	10
		25	
		—	156
No. of cases notified in 1929	...	42	
Less No. of cases dying in 1929		9	
		—	33
Total No. of cases alive and on the			—
Register at December 31st, 1929			189
			—
No. of cases in Certified Institutions	...	...	42
(a) No. of these maintained by the			
Council	...	...	31
(b) No. of these maintained by other			
bodies	...	...	11

No. of cases sent to Certified Institutions in 1929	2
No. of cases transferred from Certified Institutions to the State Institution ... ..	2
No. of cases returned to Institution as unsuitable for leave of absence ... ..	1
No. of cases under Guardianship Orders ...	2
No. of cases under Supervision in their homes ...	145
No. of Voluntary cases (excluded from above figures) under supervision ... ..	22
No. of home visits during 1929 ... ..	413

The average cost of maintenance per case per week of the 31 defectives maintained in institutions was 24/1d. as compared with 23/10d. on December 31st, 1928.

The institutions in which the 31 cases were being maintained were :—

Midland Counties Institution, Knowle, 15; Stapleton Poor Law Institution, Bristol, 4; Whittington Hall, Chesterfield, 3; Worcester Poor Law Institution, 2; Dudley Poor Law Institution, 2; Stoke Park Colony, Bristol, 1; The Cloughs Certified Institution, Stoke, 1; Seafeld House, Liverpool, 1; Home of the Holy Innocents, Exeter, 1; and Besford Court, 1.

The two cases transferred to the State Institution at Rampton were removed from the institutions in which they were previously detained owing to their violent and unsatisfactory conduct.

The assistance of the National Institute for the Blind was invited during the year in connexion with two blind mentally defective children, but they informed us with regret that they could only suggest a poor law institution for these doubly unfortunate children. One of them was later placed under a Guardianship Order.

Two cases—both in the same institution—died there during the year.

The detention of four cases was continued by the Board of Control, two for a further 5 years, and two for 1 year.

As illustrating some of our difficulties, we have had a list of eight defectives under consideration in regard to whom no less than 25 institutions have been applied to unsuccessfully for admission. Another case—that of an adult of 19 years—was submitted to us by the Board of Control. He had been certified,

firstly as feeble minded, secondly as suffering from primary dementia, and thirdly as a moral defective. Finally we were advised that he was suffering from incipient lunacy."

### **BLIND PERSONS ACT, 1920.**

The local administration of the work under this Act is delegated by the Council to the Coventry Society for the Blind, who carry out all the duties prescribed, except that relating to home workers. The latter are employed under the supervision of the Birmingham Royal Institution for the Blind.

In connexion with the blind home workers, the Local Authority paid the Birmingham Institution at the rate of grant for grant with the amount paid by the Ministry of Health, which amounts approximately to £20 per worker per annum. During the year ended March 31st, 1930, £214 18s. 2d. was paid in respect of 12 blind home workers. A home teacher from the Institution visits these workers periodically, and for his services a further sum of £33 2s. 2d. was paid in the same period.

The Institution provides these workers with material at cost price, and when necessary arranges to dispose of their finished articles; it augments, up to a maximum amount of 10/- per week, their actual earnings; the lower the earnings the more augmentation is paid, according to a definite scale.

An annual donation of £10 is made to the National Library for the Blind, based on the number of blind persons in the City able to benefit from the Library's books. Braille publications are available through the Central Public Library.

The Coventry Society for the Blind had 133 persons on the Register of Blind in the City on the 31st December, 1929, and the grant made to the Society by the Local Authority for the twelve months ended 31st March, 1930, amounted to £250

There is a local depôt for the sale of articles produced by the blind.

The Postmaster kindly informs me that under the facilities provided by the Wireless Telegraphy (Facilities for Blind Persons) Act, 61 free licences have been issued to blind persons in the City.

At the end of 1929 two blind babies were being maintained in a Sunshine Home at Leamington. In both of these cases the parents made application for their children to be dealt with.

SUMMARY OF ANNUAL RETURN CONCERNING BLIND PERSONS ON THE  
REGISTER OF THE COVENTRY SOCIETY FOR THE BLIND AT DECEMBER 31st, 1929

TABLE I. Number of Blind Persons on Register (In age groups.)

Age periods.											Total								
5	5-16		16-21		21-30		30-40		40-50		50-60		60-70		70 & over		M.	F.	Per- sons
F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.			
1	3	6	..	1	4	1	7	3	11	8	17	9	6	15	16	23	66	67	133

TABLE II.—Age incidence of Blindness amongst those on Register.

Age periods.																		
0-1	1-5		5-10		10-20		20-30		30-40		40-50		50-60		60-70		70 & over	
M. F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
2 7	1	5	3	2	5	4	4	3	5	6	12	8	6	12	16	13	2	7

TABLE III.—Employment of Blind Persons (Age 16 and over.)

Employed		Trained but Unemployed			Under Training			No training but trainable			Unemployable			Total		Per- sons
F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	
4	26	1	1	2	..	..	..	..	..	..	38	55	93	61	60	121

TABLE III. (a.) Occupations of those employed.

Mat Maker	..	..	1	Newsagent	..	..	..	1
Tuners	..	..	4	Upholsterer	..	..	..	1
Basket and Cane Workers	..	..	2	Journalist	..	..	..	1
Boot Repairers	..	..	2	Teacher of Music	..	..	..	1
Knitters	..	..	2	Lithographer	..	..	..	1
Heal Phone Testers	..	..	2	Canvasser	..	..	..	1
Typist	..	..	1	Tailor	..	..	..	1
Brush Maker	..	..	1	Baker	..	..	..	1
Tea Agent	..	..	1	Casual	..	..	..	1
Sweep	..	..	1					

TABLE IV.—Physically and Mentally Defective Blind Persons.

Mentally defective (a).		Physically defective (b).			Deaf (c).			Combinations of a, b, and c.			Total		Per- sons
F.	P.	M.	F.	P.	M.	F.	P.	M.	F.	Total.	M.	F.	
1	3	2	1	3	3	3	6	Nil.			7	5	12

TABLE V.—School Age period (5-16) According to Mental or Physical condition.

Normal		Mentally defective			Physically defective			Deaf	Total	Total defectives	Percentage defective
F.	P.	M.	F.	P.	M.	F.	P.				
1	5	6	2	1	3	Nil.			9	3	33

The following is an extract from the Annual Report (dated November 28th, 1929) to the City Council, of the Coventry Society for the Blind, viz :—

“In view of the impending changes due to the Local Government Act, 1929, the Committee think it advisable to present their Annual Report to the City Council—for whom they administer the Blind Persons Act—rather earlier than usual.

The number of Registered Blind in the City at the time of writing is 135—67 males and 68 females. The cases are classified as under:—

- (a) 3 infants—2 in the Sunshine Home, Leamington; 1 at home with parents.
- (b) 7 children of school age.
- (c) 1 adult trainee.
- (d) 13 employed by various firms.
- (e) 12 home-workers.
- (f) 7 in union.
- (g) 3 observation cases.
- (h) 4 of independent means.
- (i) 85 unemployables (4 of these are Guardians' cases).

The care of the last-named section is the main work of the Society, and some progress has been made since 1928; the Committee feel, however, that much remains to be done before the service can be considered adequate. A second Home Visitor will need to be engaged before long—perhaps not at first for whole-time service.

There is a present deficit on the main financial resources, which will not be lessened in the future unless increased financial help is forthcoming—the grants must go on, and new cases needing assistance are constantly being registered.

Efforts have been made throughout the year to keep the home-workers employed, and in this connexion the Committee wish to express their thanks to the City Council for orders given to the blind workers; the Committee hope for further similar orders in the future.

The Society has again been helped by various religious social bodies in the organisation of monthly social gatherings, which have been much appreciated.

The Tuesday class, which meets for instruction in pastime occupations, is now self-supporting, the members disposing of the articles they make, at a small profit, which latter pays for the hire of the room.

We have to record with deep regret the death during the year of our Honorary Treasurer, Mr. F. Foster, who had given many years of devoted service to the cause of the Blind, and who will be greatly missed. We have also suffered a loss on the Committee by the death of Miss M. Jones, whose cheery personality and unselfish service have left a blank.

We are very glad to be able to record that we have secured the services of Mr. R. L. Meats as Honorary Treasurer.”

R. E. STANER,  
Honorary Secretary.



## HEALTH PROPAGANDA.

An enormous amount is done to-day for the public in the matter of health services. The efforts of the preventive physician, the sanitarian and the social worker combined, however, cannot attain to a maximum usefulness without the earnest co-operation of those whom they seek to help. The expert can indicate the ways to communal health, but unless his exhortations receive public heed his efforts will partially fail. The fact is that the individual of the community is not unusually the final arbiter in respect of his state of health. That being so, he must be induced to appreciate the vital importance of health to himself and to others, and be taught how he can play his part in promoting it. This is done by health propaganda applied, not in the form of occasional stunts, but rather in the form of continuous education.

Public enlightenment in health matters is an essential part of the work of a modern public health department. This is recognised by Section 67 of the Public Health Act, 1925, which empowers local authorities to incur expenditure in this connexion.

### *" Better Health " Journal.*

This popular monthly journal has been circulated in the City by this Department during the past year. It is produced by the Central Council for Health Education and adapted to local requirements. The present circulation of the Coventry edition is 4,000 copies per month. The journal contains very helpful articles on topical health matters and is very well received. It is pleasing to note that the local press publish extracts from " Better Health," and in this way a wider public is obtained.

The possibilities in regard to a wider scheme of health education work in the city are being explored during the current year.

## General Provision of Health Services.

Information in a summarized form is asked for by the Ministry of Health under the following heads:—

### *Hospitals provided or subsidized by the Council:—*

#### (A) (1) *Fever.*

The City Isolation Hospital provided by the Council is situate in Stoney Stanton Road; built for 104 beds.



(2) *Small Pox.*

The Pinley Small Pox Hospital provided by the Council is situate on the south-east outskirts of the City; built for 18 beds.

(B) (1) *Tuberculosis.*

A Sanatorium is provided by the Joint Tuberculosis Committee of Warwickshire and Coventry. Hertford Hill Sanatorium, situate at Hatton, in the Warwick Rural District; accommodation for 190 beds for men, women and children.

(2) *Maternity.*

No hospital or home is provided by the Council, but by agreement with the Coventry and Warwickshire Hospital and with the Board of Guardians, beds in the Maternity Wards at this Hospital and at the Gulson Road Hospital are at the call of the Maternity and Child Welfare Committee.

(3) *Children.*

No provision is made by the Council, but there are Children's Wards at the Coventry and Warwickshire and Gulson Road Hospitals.

(4) *Other.*

The General Hospital for the City is the Coventry and Warwickshire Hospital, situate in Stoney Stanton Road. It is a voluntary institution, and has accommodation for 275 beds.

The Gulson Road Hospital has accommodation for 336 beds.

*Institutional provision for unmarried mothers, illegitimate infants and homeless children.* Accommodation for any of these cases is available at the Gulson Road Institution.

*Ambulance facilities.*

The Council has provided—

- (a) Motor Ambulances and a van for infectious cases.
- (b) Motor Ambulances for non-infectious cases and accidents.

*Clinics and Treatment Centres.*

The Municipal Infant Welfare Centre is carried on at the Old Barracks Hospital, and includes an Ante-natal Clinic. No treatment is provided.

There are three voluntary Infant Welfare Centres, managed by a voluntary committee of ladies, and these are situate at Leicester Causeway, Bray's Lane, and Dunsmoor, Holyhead Road.

A further three voluntary Infant Welfare Centres, under the management of three separate voluntary committees, are situated in the extended portion of the City:—At Stoke Heath, open each Wednesday; at Holbrooks Lane, open every other Wednesday; and at Longford, open every other Thursday. The Council allots the

services of a Health Visitor to each Centre, and the services of a Medical Officer to Stoke Heath and Holbrooks Lane Centres. The Longford Centre have made their own arrangements for the attendance of a medical man.

There are no Day Nurseries.

The School Clinic is situate in King Street and contains:—General Treatment, Dental, Eye, X-Ray and Cleansing Departments. (See School Medical Officer's Report).

The Central Tuberculosis Dispensary of the Warwickshire and Coventry Joint Committee is situate at 4, The Quadrant. It is fitted with an X-Ray Department.

The Venereal Diseases Treatment Centre is organised as part of the Coventry and Warwickshire Hospital.

An Orthopædic Clinic is carried on at "Dunsmoor," Holyhead Road. It is a voluntary institution.

*Public Health Officers.* (See page 3).

*Professional Nursing in the Home.*

(a) *General*

There are three nursing associations—the Coventry and District, the Foleshill, and the Tile Hill, Westwood and District Nursing Associations. Private nurses are available if required.

(b) *For Infectious Diseases, e.g., Measles, etc.*

By agreement with the City Council the home nursing of measles, German measles, whooping cough, puerperal fever and puerperal pyrexia is performed by the two Nursing Associations. A retaining fee is paid, £50 per annum to the Coventry Association, and £8 6s. 8d. to the Foleshill Association, to cover all cases attended and nursed. A return of all such cases attended is sent to the Medical Officer of Health. The arrangements for general home nursing in the City are in the hands of the voluntary Nursing Associations.

*Midwives.*

The City Council does not employ practising midwives, nor does it subsidize any.

The number of practising midwives in the City is 53, and some details of their work are given on page 70.

## **Chemical and Bacteriological Work.**

Chemical examinations of water are carried out by the Chemist appointed by the Waterworks and Sewage Committees, Mr. C. B. O. Jones. Food and Drug samples are forwarded to the Public Analysts.

Bacteriological investigation of water samples and of milk is done at the Birmingham University by arrangement; venereal diseases specimens are sent there also, although some few of the latter are now being examined at the Coventry and Warwickshire Hospital.

Bacteriological examinations in aid of the diagnosis of infectious diseases are largely performed by the Lister Institute, although during the past year a considerable amount of this work has been carried out by the Deputy Medical Officer of Health, in the laboratory attached to the Public Health Department.

#### BACTERIOLOGICAL DIAGNOSIS OF INFECTIOUS DISEASE.

The total number of specimens examined is given below:—

			Samples sent.	Result positive.	Result negative.
Typhoid Fever	...	...	8	3	5
Diphtheria	...	...	753	253	500
Phthisis	...	...	1150	234	916
Syphilis	...	...	683	208	475
Gonorrhœa	...	...	163	61	102
Spirochetes, &c	...	...	10	6	4
			<hr/>	<hr/>	<hr/>
Totals	...	...	2767	765	2002
			<hr/>	<hr/>	<hr/>

Of the above specimens, 151 Diphtheria swabs were sent from the City Hospital, and 195 Wassermann samples from the Venereal Diseases Treatment Centre, Coventry and Warwickshire Hospital.

#### Public Mortuary.

The Public Mortuary was used on 68 occasions during the year, and the post-mortem room therein was in commission 27 times.

#### Local Acts, Adoptive Acts, Bye-laws, and Local Regulations (with dates) in force in the City.

##### Local Acts.

The Coventry Corporation Act, 1900	...	Royal Assent, 6/8/1900
The Coventry Corporation Act, 1907	...	„ „ 2/8/1907
The Coventry Corporation Act, 1911	...	„ „ 2/6/1911
The Coventry Corporation Act, 1920	...	„ „ 4/8/1920
The Coventry Corporation Act, 1921	...	„ „ 17/8/1921
The Coventry Corporation Act, 1927	...	„ „ 29/7/1927

##### Adoptive Acts.

The Infectious Disease (Notification) Act, 1889	...	1/1/1890
The Infectious Disease (Prevention) Act, 1890	...	do.
The Public Health Acts Amendment Act, 1890	...	do.
The Museums and Gymnasiums Act, 1891	...	1/9/1894
The Private Street Works Act, 1892	...	3/4/1893
The Public Libraries Acts	...	1867
The Baths and Washhouses Acts	...	1846, 1847, 1878
The Public Health Acts Amendment Act, 1907	...	1910
(Various parts).		
The Public Health Act, 1925 (Parts II., III. [less Section 33], IV. and V.)	...	1/3/1926

**Bye-Laws.**

Common Lodging Houses ...	...	...	...	14/1/1851
Slaughter Houses ...	...	...	7/7/1859 and	26/4/1892
Nuisances ...	...	...	...	24/5/1859
Houses let in Lodgings ...	...	...	...	14/12/1885
Public Baths ...	...	...	...	9/11/1893
New Streets and Buildings...	...	...	...	30/3/1927
Employment of Children ...	...	...	...	30/4/1910
Offensive Trades ...	...	...	...	26/10/1920

In the Appendix overleaf will be seen the classification in the Extended Schedule of the Deaths which occurred during the year.

The School Medical Report will be found on page 137.

# EXTENDED SCHEDULE OF AGES AND CAUSES OF DEATH, YEAR 1929.

\* Only those causes under which deaths were registered during the year are given in this Table.

No.	CAUSE OF DEATH.	Total	Males.	Females.	Ages.														
					0 to 1	1 to 2	2 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 60	60 to 65	65 to 75	75 to 85	85 and upwards.
1-42	I. Epidemic, Endemic and Infectious Diseases.																		
1	Enteric Fever .. ..	2	1	1	.. 3	.. 9	.. 14	.. 3	..	..	..	2	..	..	..	..	..	..	..
7	Measles .. ..	29	18	11	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
8	Scarlet Fever .. ..	1	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
9	Whooping Cough .. ..	40	11	29	12	17	9	1	..	..	..	..	..	..	..	..	..	..	..
10	Diphtheria .. ..	37	16	21	2	2	10	20	3	..	..	..	..	..	..	..	..	..	..
11	Influenza .. ..																		
	1. With pneumonic complications .. ..	46	28	18	2	1	1	1	2	3	3	2	8	10	4	2	4	3	..
	(a) 2. With other pulmonary complications .. ..	23	12	11	..	..	1	..	1	..	..	..	1	5	1	1	8	5	..
	1. With non-pulmonary complications .. ..	12	8	4	1	..	..	..	..	2	..	1	..	3	..	1	2	1	1
	(b) 2. Without stated complication .. ..	16	9	7	.. 2	..	1	..	..	..	1	1	1	..	1	..	1	6	4
21	Erysipelas .. ..	3	3	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..
23	Encephalitis lethargica .. ..	4	1	3	..	..	1	..	..	1	..	1	..	1	..	..	..	..	..
24	Meningococcal meningitis .. ..	1	1	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..
29	Tetanus .. ..	1	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..
30	Mycoses .. ..	1	..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..
	(1) Actinomycosis .. ..																		
31-37	TUBERCULOSIS (All Forms).																		
31	Respiratory system .. ..	158	111	47	1	..	.. 1	1	1	19	14	36	27	38	11	7	3	..	..
32	Nervous system .. ..	8	5	3	..	..	1	2	2	1	..	1	..	..	1	..	..	..	..
33	Intestines and peritoneum .. ..	2	1	1	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..
34	Vertebral column .. ..	3	..	3	..	..	..	..	..	2	1	..	..	..	..	..	..	..	..
35	Joints .. ..	1	1	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..
37	Disseminated tuberculosis .. ..																		
	(a) Acute .. ..	2	1	1	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..
	(b) Chronic or unstated .. ..	3	2	1	..	..	2	..	..	..	..	..	2	3	..	..	1	..	..

No.	CAUSE OF DEATH.	Total.	Male.	Female.	0 to 1	1 to 2	2 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 60	60 to 65	65 to 75	75 to 85	85 and upwards.
43-69	II. General Diseases not included in I. (1-42.)																		
43-49	CANCER, MALIGNANT DISEASE	13	13	..	..	..	..	..	..	..	..	..	1	4	3	3	2	..	..
43	Buccal Cavity ..																		
44	Pharynx, cesophagus, stomach, liver and annexa ..	63	33	30	..	..	..	..	..	1	1	1	3	7	6	26	10	..	..
45	Peritoneum, intestines & rectum ..	45	27	18	..	..	..	..	..	..	..	..	..	6	9	14	6	3	3
46	Female genital organs.. ..	26	..	26	..	..	..	..	..	..	..	..	2	3	5	4	..	..	..
47	Breast ..	25	..	25	..	..	..	..	..	..	..	..	3	2	4	7	2	..	..
49	Other or unspecified organs ..	41	24	17	..	..	..	..	..	1	..	2	6	7	6	16	3	..	..
51	Rheumatic fever ..	13	4	9	..	..	..	3	1	1	1	2	3	2	..	..	..	..	..
52	Chronic rheumatism, osteo-arthritis, gout ..																		
	(2) Rheumatoid & osteo-arthritis	7	2	5	..	..	..	..	..	..	..	..	..	..	..	5	2	..	..
56	(3) Gout ..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..
57	Rickets ..	1	..	1	..	..	..	1	..	..	..	..	4	..	4	6	1	..	..
58	Diabetes ..	17	7	10	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..
	Anæmia, Chlorosis ..	5	..	5	..	..	..	..	..	..	..	1	..	..	1	2	1	..	..
	(a) Pernicious anæmia ..	1	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..
	(b) Other anæmias and chlorosis																		
60	Diseases of the thyroid gland ..	5	..	5	..	..	..	..	..	2	..	1	2	..	..	..	..	..	..
62	(a) Exophthalmic goitre.. ..	2	1	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..
65	Diseases of the thymus ..	3	3	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..
	Leukæmia, lymphadenoma																		
	(a) Leukæmia ..	1	..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..
69	Other general diseases ..																		
	(1) Purpura ..																		
70-86	III. Diseases of the Nervous System and Sense Organs.																		
71	Menigitis ..	15	5	10	6	1	2	..	1	1	1	1	1	1	..	..	..	..	..
72	Tabs dorsalis (locomotor ataxy)	7	4	3	..	..	..	..	..	..	..	..	2	2	4	2	..	..	..
73	Other diseases of the spinal cord	6	5	1	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..
74	Cerebral hæmorrhage, apoplexy, etc																		
	(1. Cerebral hæmorrhage, so returned ..	66	29	37	1	..	..	..	..	..	..	2	12	6	11	17	12	4	4
	(2. Apoplexy, lesion unstated ..	2	1	1	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..
	(b) 2. Cerebral thrombosis ..	11	4	7	..	..	..	..	..	..	..	..	..	..	..	3	4	..	..



No.	CAUSE OF DEATH.	Total.	Males.	Females.	Ages.													85 and upwards
					0 to 1	1 to 2	2 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 60	60 to 65	65 to 75	
75	Paralysis of unstated origin .. (a) <i>Hemiplegia</i> .. ..	11	8	3	..	..	..	..	..	..	..	1	..	1	1	5	2	..
76	(b) <i>Other forms of paralysis</i> ..	2	1	1	..	..	..	..	..	..	..	..	..	..	..	1	..	..
77	General paralysis of the insane ..	3	1	2	..	..	..	..	..	..	..	..	..	1	..	..	..	..
78	Other forms of insanity ..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..
79-80	Epilepsy .. ..	6	3	3	..	..	..	..	1	..	..	..	1	2	..	1	..	..
84	Convulsions (non-puerperal) ..	6	4	2	4	2	..	..	..	..	..	..	..	..	..	..	..	..
	Other diseases of the nervous system .. ..																	
	(2) <i>Cerebral tumour</i> .. ..	7	3	4	..	..	..	..	1	1	..	1	2	..	1	1	..	..
	(3) <i>Disseminated sclerosis</i> ..	5	..	5	..	..	..	..	..	2	..	..	2	..	..	1	..	..
86	(4) <i>Paralysis agitans</i> .. ..	6	5	1	..	..	..	..	..	..	..	..	..	..	1	1	4	..
	Diseases of the ear and of the mastoid sinus .. ..																	
	(1) <i>Diseases of the mastoid sinus</i> ..	3	1	2	2	..	..	1	..	..	1	..	..	..	..	..	..	..
	(2) <i>Diseases of the ear</i> .. ..	6	2	4	..	..	1	1	1	1	..	1	..	..	..	..	..	..
87-96	IV. Diseases of the Circulatory System.																	
87-90	HEART DISEASES.																	
87	Pericarditis .. ..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	1	..	..
88	Acute endocarditis and myocarditis .. ..																	
	(1) <i>Infective endocarditis</i> .. ..	1	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..
89	(2) <i>Other acute endocarditis</i> ..	3	2	1	..	..	..	..	..	..	..	..	..	1	..	1	..	..
90	Angina pectoris .. ..	6	4	2	..	..	..	..	..	..	..	..	..	..	1	4	..	..
	Other diseases of the heart ..																	
	(1) <i>Aortic valve disease</i> .. ..	7	5	2	..	..	..	1	..	..	..	..	2	3	..	3	1	..
	(2) <i>Mitral valve disease</i> .. ..	16	8	8	..	..	..	..	..	..	..	..	1	2	..	5	..	..
	(4) <i>Other or unspecified valve diseases</i> .. ..	23	9	14	..	..	..	1	..	..	..	..	4	3	..	7	3	..
	(5) <i>Fatty Heart</i> .. ..	10	4	6	..	..	..	..	..	2	..	..	2	..	..	2	..	..
	(7) <i>Other or unspecified myocardial disease</i> .. ..	208	90	118	..	..	..	..	..	..	..	1	2	10	7	16	80	74
	(8) <i>Disordered action of the heart</i> .. ..	7	2	5	..	..	..	..	..	..	..	..	1	2	1	2	3	4



No.	CAUSE OF DEATH.	Total.	Males.	Females.	Ages.																85 and upwards
					0 to 1	1 to 2	2 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 60	60 to 65	65 to 75	75 to 85			
105	Asthma .. .. .	12	4	8	..	..	..	..	..	..	..	1	2	2	1	2	3	..	1		
107	Other diseases of the respiratory system .. .. .	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..		
	(a) <i>Chronic interstitial pneumonia</i> .. .. .				..	..	..	..	..	..	..	..	..	..	..	..	1	..	..		
	(c) <i>Other diseases included under 107</i> .. .. .	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..		
VI. Diseases of the Digestive System.																					
108	Diseases of the buccal cavity and annexa .. .. .	1	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
	(2) <i>Ludwig's Angina</i> .. .. .				..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
109	Diseases of the pharynx & tonsils (1) <i>Tonsillitis, etc., adenoid vegetations</i> .. .. .	9	3	6	..	..	..	3	..	..	2	1	1	2	..	..	..	..	..		
111	Ulcer of the stomach or duodenum (a) <i>Ulcer of the stomach</i> .. .. .	7	4	3	..	..	..	..	..	..	..	1	..	3	2	..	1	..	..		
	(b) <i>Ulcer of the duodenum</i> .. .. .	4	4	..	..	..	..	..	..	..	..	..	1	2	1	..	..	..	..		
112	Other diseases of the stomach .. (1) <i>Inflammation of the stomach</i> .. .. .	5	4	1	1	..	..	..	..	..	..	..	..	..	1	..	3	..	..		
	(2) <i>Other diseases included under 112</i> .. .. .	2	1	1	..	..	..	..	..	..	..	..	..	..	1	..	1	..	..		
113-114	Diarrhoea and enteritis .. .. . (2) <i>Colitis</i> .. .. .	4	..	4	1	..	..	..	..	..	..	..	1	1	..	..	..	1	..		
	(3) <i>Other diseases included under 113-114</i> .. .. .	18	8	5	9	..	..	1	..	..	..	..	..	5	..	..	1	2	..		
117	Appendicitis and typhlitis .. .. .	23	13	10	..	..	..	3	..	4	1	3	..	3	1	1	2	..	..		
118	Hernia, intestinal obstruction .. .. . (a) <i>Hernia</i> .. .. .	5	2	3	..	..	..	..	..	..	..	1	..	2	..	..	1	1	2		
	(b) <i>Intestinal obstruction</i> .. .. .	10	6	4	1	2	..	..	..	..	..	1	1	..	..	1	2	2	..		
119	Other diseases of the intestines .. .. .	5	4	1	..	..	..	..	..	..	..	2	..	..	..	2	1	..	..		









No.	CAUSE OF DEATH.	Total.	Males.	Females.	Ages.														85 and upwards
					0 to 1	1 to 2	2 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 60	60 to 65	65 to 75	75 to 85	
184	Accidental injury :—																		
	By cutting or piercing instru-																		
185	ments .. ..	2	2	..	..	1	..	..	..	..	..	1	1	..	..	1	..	2	1
186	By fall .. ..	12	6	7	..	1	..	..	..	..	..	1	1	..	..	1	..	..	..
188	In mines and quarries .. ..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..
	By other forms of crushing																		
	(vehicles, railways, etc.) ..	38	31	7	..	2	..	2	1	4	6	8	4	3	1	2	3	2	..
193	Excessive cold .. ..	1	..	1	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..
204-205	<b>XV. Ill-Defined Diseases.</b>																		
205	Cause of death unstated or ill-																		
	defined .. ..	3	1	2	..	..	..	..	..	..	..	..	..	1	1	..	1	1	..
	(1) Heart failure (1-70 years)	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(2) Other ill-defined causes	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(3) Cause not specified ..	1	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	GRAND TOTALS ..	1992	998	994	178	71	63	55	24	50	48	102	131	232	137	154	399	277	71

CITY OF COVENTRY.



# Annual Report

OF THE

SCHOOL MEDICAL OFFICER

FOR THE YEAR

1929.

## EDUCATION COMMITTEE.

MR. ALDERMAN V. WYLES, J.P., *Chairman.*

MR. COUNCILLOR A. TURNER, J.P., *Vice-Chairman.*

THE MAYOR (MR. ALDERMAN F. LEE, J.P.)

MR. ALDERMAN BARNACLE, O.B.E.	MRS. COUNCILLOR THOMSON.
„ „ BATES, B.Sc., J.P.	MR. „ THOMSON.
„ „ HALPIN, J.P.	„ „ WILLIAMS.
„ „ SNAPE, J.P.	MISS H. DAVIDSON.
„ „ SODEN, M.R.C.S., J.P.	„ A. E. FRENCH.
MR. COUNCILLOR ARMISHAW.	„ M. SCAMPTON, J.P.
„ „ BAYLEY.	MR. H. E. CALDICOTT, J.P.
„ „ CHESHIRE, M.B.E.	„ E. J. KIPPS, M.Sc.
„ „ FARREN, O.B.E.	„ J. W. LEE.
„ „ J. FENNELL.	„ A. B. ODELL.
„ „ LEE GORDON.	„ W. H. SPENCER.
MRS. „ HUGHES.	„ R. J. TILT.
MR. „ HOLBROOK.	„ H. J. WHITE.
„ „ MCGOWRAN.	„ A. P. YOUNG.
MRS. „ SMITH.	

### MEDICAL DEPARTMENT STAFF

(as on December 31st, 1929.)

School Medical Officer \*E. H. SNELL, M.D., D.P.H.

Deputy School Medical

Officer - - \*\*A. J. B. GRIFFIN, M.B., B.Ch., D.P.H.

Assistant School Medical Officers	{	***O. R. HORWOOD, M.A., M.R.C.S., L.R.C.P., D.P.H.
		MARGARET J. MOIR, M.A., M.D., D.P.H., D.M.R.E.

School Oculist - - T. HARRISON BUTLER, M.A., M.D., M.R.C.S.

X-Ray Specialist - - T. E. C. COLE, M.A., M.D., M.R.C.P.

Aural Surgeon - - F. W. SYDENHAM, M.D., F.R.C.S.ED.

Senr. School Dentist - M. RAESIDE L.D.S.

Assistant School Dentist V. G. BOYLE, L.D.S.

School Nurses - -	{	MISS G. I. WHITE. †
		„ A. L. LYDDON. §††*
		„ M. E. ADCOCK. ¶
		„ W. PAYNE. ¶
		(Resigned 31st August, 1929).
		„ E. C. BATSFORD. ¶
		„ M. A. EVANS. ¶
		(Appointed 15th July, 1929).
		„ B. WILKIE. §†¶
		(Appointed 1st October, 1929).

Cleansing Attendant - - MRS. FISHER.

Senior Clerk - - T. F. MARSDEN.

Junior „ - - MISS P. M. WALLIS.

\* Retired January 31st, 1930. Succeeded on February 1st, 1930 by A. MASSEY, M.D., D.P.H.

\*\* Resigned February 14th, 1930. Succeeded on April 10th by H. L. OLDERSHAW, M.B., B.S., D.P.H.

\*\*\* Resigned December 31st, 1929. Succeeded on April 1st, 1930 by J. J. MURRAY, M.B., Ch.B., D.P.H.

‡ Certificate of Central Midwives Board.

† Health Visitor's Certificate of Royal Sanitary Institute.

‡ Certificated (Fever) Nurse.

\* Inspector's Certificate Royal Sanitary Institute.

¶ Three Years General Trained Nurse.

## CITY OF COVENTRY.

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 Twenty-fifth Annual Report

 OF THE  
 SCHOOL MEDICAL OFFICER.
 

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To the Right Worshipful the Mayor, Aldermen,  
 and Councillors of the City of Coventry.

MR. MAYOR, LADIES AND GENTLEMEN,

*I have the honour to present the twenty-fifth Annual Report—that for 1929—concerning the School Medical Service of the City. You will appreciate that the period under review is one of which I have no first-hand knowledge, seeing that my service in Coventry, as your School Medical Officer, dates only from February first of the current year, 1930, when I took over from my very esteemed predecessor Dr. E. H. Snell. Nevertheless, you will find that the survey, in the following pages, of the year's work embraces all essential particulars, although elaboration by me thereon is limited by the circumstances above mentioned.*

*The school medical work in 1929 followed the same general lines as in previous years. During the year, 7,398 children were subjected to routine medical inspection, while in addition there were 8,277 special inspections or re-inspections. Of the former, some 23 per cent. were found to require medical treatment in some form or other. On the dental side, 8,854 children underwent routine inspection, of whom no less than 7,418 were found to be in need of treatment; of the latter, 3,737 were actually treated. These figures, together with those appearing in the Appendix, will convey an idea of the volume of work performed.*

Certain matters suggest themselves for comment. Reference has been made in previous reports to the unsuitability of the present School Clinic at King Street. It is no credit to an important and progressive city. The projected scheme for a new combined Maternity and Child Welfare and School Clinic in Gulson Road will, it is hoped, ere long assume definite shape. There is need of a closer linking-up of infant welfare with school medical work in order to secure a greater degree of continuity of service on behalf of the child from the cradle to school-leaving; the position is being fully explored. It is difficult to avoid the impression that "follow-up" work among school children is suffering to some extent owing to numerical inadequacy of school nursing staff.

Diphtheria has been troublesome during the year in the school population, and among the measures directed against the disease, 1,171 children were immunized by the Schick method. The usual paucity of ascertained cases of pulmonary tuberculosis among school children was noted. From the findings more cannot be said than that phthisis with evident clinical signs is rare in the child. Myopia (short sight) appears to be on the increase. The cause of this condition is probably to be found under one or more of the headings heredity, malnutrition and environment.

A disquieting feature of the routine inspection returns is the low percentage of vaccinated children in Coventry. The dental aspect of the year's work, among other things, demonstrates clearly that many parents do not yet appreciate the vital importance of conservative treatment; too many children present themselves to the dentist at a stage when extractions only are practicable.

The work of Corley Open-Air School appeals to me as worthy of special mention, for it represents the application of the true principles of preventive medicine.

The Medical Service is not only concerned with the person and environment of the child, but also to some extent with his education. The teaching in schools of hygiene and biology is of inestimable value. The fostering of a "health conscience" in the individual is perhaps the surest means we have of promoting communal health. There is no better way of doing this than by systematic teaching of hygiene to the rising generation. Instruction in elementary biology acquaints the child, in a clean

scientific manner, with the facts of life and reproduction. A child so equipped can face the world in later life forewarned, and thus forearmed, against many social pitfalls. For example, the rational prevention of venereal disease must start this way. More might be done on these lines.

The foregoing will suffice to show how wide is the application of school medical work. It is clear also that as regards certain aspects of the work the medical side is closely connected with the educational, necessitating a sympathetic understanding between the two. Happily in Coventry this definitely obtains, and I wish accordingly to express appreciation to Mr. F. H. Harrod, the Director of Education.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

ARTHUR MASSEY,

School Medical Officer.

The Council House,

Coventry.

April, 1930.

### 1. Staff.

The names of the staff are set out on page 138.

### 2. General Observations.

See pages 139-141.

### 3. School Hygiene.

There are 24 Council Elementary Schools, with 58 Departments, and 14 Non-Provided Elementary Schools with 19 Departments; there are also 4 Secondary Schools, 1 Junior Technical School, 1 School for Mental Defectives (non-residential), and 1 residential open-air school.

The nominal total accommodation of the Elementary Schools at the close of the year was for 25,312 scholars. There were



23,765 children on the school registers at the close of the year, the average for the year being 23,824.

The average attendance was 21,016, which gave an average percentage attendance for the year of 88.2.

The replacement of the trough closets by modern pedestal water closets was effected during the year at Little Heath and Paradise Schools.

Building operations in the outlying districts of the City have been extensive during the past few years; this, together with the additional area taken over in the Boundary Extension, has created in certain areas a demand for more school accommodation, and in this connexion new schools are to be erected in the Green Lane and Tile Hill districts.

A new senior boys' department is in course of erection at Stoke Council School; this has become necessary through the increasing pressure on the accommodation brought about by the number of new houses erected. To cope with the present situation temporary accommodation has been provided elsewhere.

Windmill Road School is to be installed with electric light, and at South Street Boys' School additional cloak room accommodation has been provided.

Certain improvements have been carried out at Corley Open-Air School, *i.e.*, an improved roadway entrance has been made, additional asphaltting to the playground laid down and a new length of covered way provided.

Arrangements were made during the year for the washable clothing of the children from the last-named school to be sent to a local laundry each week instead of to their homes as formerly. In addition, a schedule of clothing, considered suitable and adequate, was drawn up by the Committee, and parents were asked to provide this before a child was admitted.

St. Peter's School was closed at the end of the year, having been condemned by the Board of Education. It had previously been allowed to continue open until arrangements were complete for the transference of the children therefrom to other schools.

#### **4. Medical Inspection.**

Children are examined periodically at the systematic examinations at schools, and each assistant school medical officer has a clinic on one afternoon a week.

When necessary the parents are advised to obtain a family doctor.

The methods of medical inspection have been given in detail in previous Reports.

In 1929, 7,398 children were systematically examined. Particulars are set out in Table I., page 172.

In addition there were 8,277 special Inspections or Re-Inspections.

## 5. Findings of Medical Inspection.

Review of the facts disclosed by medical inspection.

### (a) *Uncleanliness.*

As it was thought desirable to have accurate statistics of the condition of cleanliness of Coventry school children, the following table has been completed. The schools represented are those dealt with by one particular medical officer, but they constitute a fair sample of the whole. The prescribed standard of cleanliness is a high one. In this connection, parents receive 24 hours' notice of the proposed examination of their children, and have thus the opportunity of keeping them at home. The heads of some children are found to have been specially prepared for the examination, but where there is evidence of special preparation the head is not placed in the "clean" class, but is marked down for observation. There is no doubt, however, that in an examination without warning the number of verminous heads would be higher, and there certainly would be some in the "nits, vermin and sores" class.

In the last five years a distinct change has been observed in the attitude of the mother towards these undesirable conditions. Whereas once she was, if not abusive, at any rate, highly indignant that mention was made of such "weakness," now she is inclined to be apologetic and desirous of effecting an improvement.

The findings were as follows :—

Clean heads, 83.77%.

Body vermin present in 0.067%.

Fleas present in 2.31%.

## UNCLEANLINESS.

School in which children Examined.	No. of children Examined.	Clean Heads.	Very few Nits or few Nits.	Nits.	Nits and Vermin and Nits. + +	Nits and Vermin and Sores.	Body Vermin.	Few Flea Bites.	Flea Bites.	Flea Bites. + +
Spon St. ...	346	271	30	33	12	...	1	4	1	...
Earlsdon ...	216	189	15	8	4	...	...	4	...	...
Broadway ..	102	94	3	3	2	...	1	1	...	...
St. John's ..	105	88	7	7	3	...	...	...	...	...
St. Osburg's ..	97	74	8	13	2	...	...	1	3	...
Stoke C.E. ...	57	53	4	...	...	...	...	...	...	...
All Saints' ...	109	96	5	7	1	...	...	2	...	...
South St. ...	282	221	26	25	10	...	...	1	2	...
St. Mary's ...	117	88	15	10	4	...	...	1	...	1
Wheatley St. ...	368	308	20	28	12	...	1	2	1	1
Little Heath ...	93	80	6	5	2	...	...	1	...	...
Paradise ...	83	75	4	...	4	...	...	...	...	...
Edgewick ...	150	131	10	9	...	...	...	...	...	...
Broad St ...	102	91	3	7	1	...	...	...	2	...
Narrow Lane ...	240	181	25	21	13	...	...	5	1	...
Holbrook Lane	548	436	57	41	14	...	...	10	7	2
St. Elizabeth's	75	63	5	5	2	...	...	3	2	...
Fredk. Bird ...	372	348	7	12	5	...	...	4	2	...
Barker Butts ...	481	442	24	10	5	...	...	14	8	1
Red Lane ...	229	174	28	23	4	...	...	5	2	...
St. Mark's ...	122	104	9	5	4	...	...	4	...	...
All Souls' ...	88	71	7	7	3	...	...	1	...	1
St. Peter's ...	43	29	5	7	2	...	...	4	1	...

During the year, 6 cases of verminous heads were cleansed at the King Street Clinic, under Section 87 of the Education Act, 1921, and 583 voluntary cases (sore-heads, scabies, etc.) were treated there at the request of parents, resulting in 4,080 attendances by children.

(b) *Minor Ailments.*

See Table IV., Group I., page 177.

The following table shows the work done at the clinic in the treatment of certain minor ailments.

CONDITION.				Number of Cases.	Attendances.
Skin :—					
Ringworm—scalp	..	..	..	20	99
Ringworm—body	..	..	..	12	87
Scabies	..	..	..	60	648
Impetigo	..	..	..	361	3113
Other skin diseases	..	..	..	17	318
Minor Eye Defects	..	..	..	146	1705
Minor Ear Defects	..	..	..	254	1895
Miscellaneous	..	..	..	35	324
Totals				905	8189

(c) *Tonsils and Adenoids and middle ear disease.*

See Table IV., Group III., page 178.

(d) *Tuberculosis.*

See Table III., page 176.

(e) *Skin Diseases.*

See Table IV., Group I., page 177, also (b) Minor Ailments.

(f) *External Eye Disease.*

The common conditions under this heading, such as styes and blepharitis, are as a rule successfully treated at the School Clinic. Severer cases or refractory cases of the above-named are referred to the Ophthalmic Specialist. External eye conditions are not uncommonly associated with general debility due to malnutrition and lack of vitamins.

(g) *Vision.*

The number of cases of defective vision found at the systematic examination represented 10% of the children so examined.

Mr. T. Harrison Butler, the School Oculist, presents the following interesting survey of the work in connexion with the Ophthalmic Department, viz. :—

“There was a slight increase in the work done at the eye-clinic in 1929 compared with 1928. 1,097 City children were examined and 925 pairs of glasses were ordered. The total

attendances were 1,872, and the majority of the cases attended twice. 43 children holding scholarships at Secondary Schools visited the clinic, and 36 received prescriptions for spectacles.

During the past three years I have formed the impression that the number of short-sighted children is increasing, and to ascertain whether this is really a fact I have investigated the statistics of myopia for the past ten years. My results are shewn on the graph, and confirm my suspicion that myopia has increased in Coventry.

The figures afford no clue as to the proportion of myopia compared with hypermetropia, because practically all the short-sighted children are discovered by the test types, whereas most of the hypermetropes of low and medium degree can read all the lines and are not examined at the Clinic. On the other hand, the figures give the approximate number of short-sighted children on the register. If all the children are tested, the proportion is 15%, and I imagine that this is sufficiently correct.

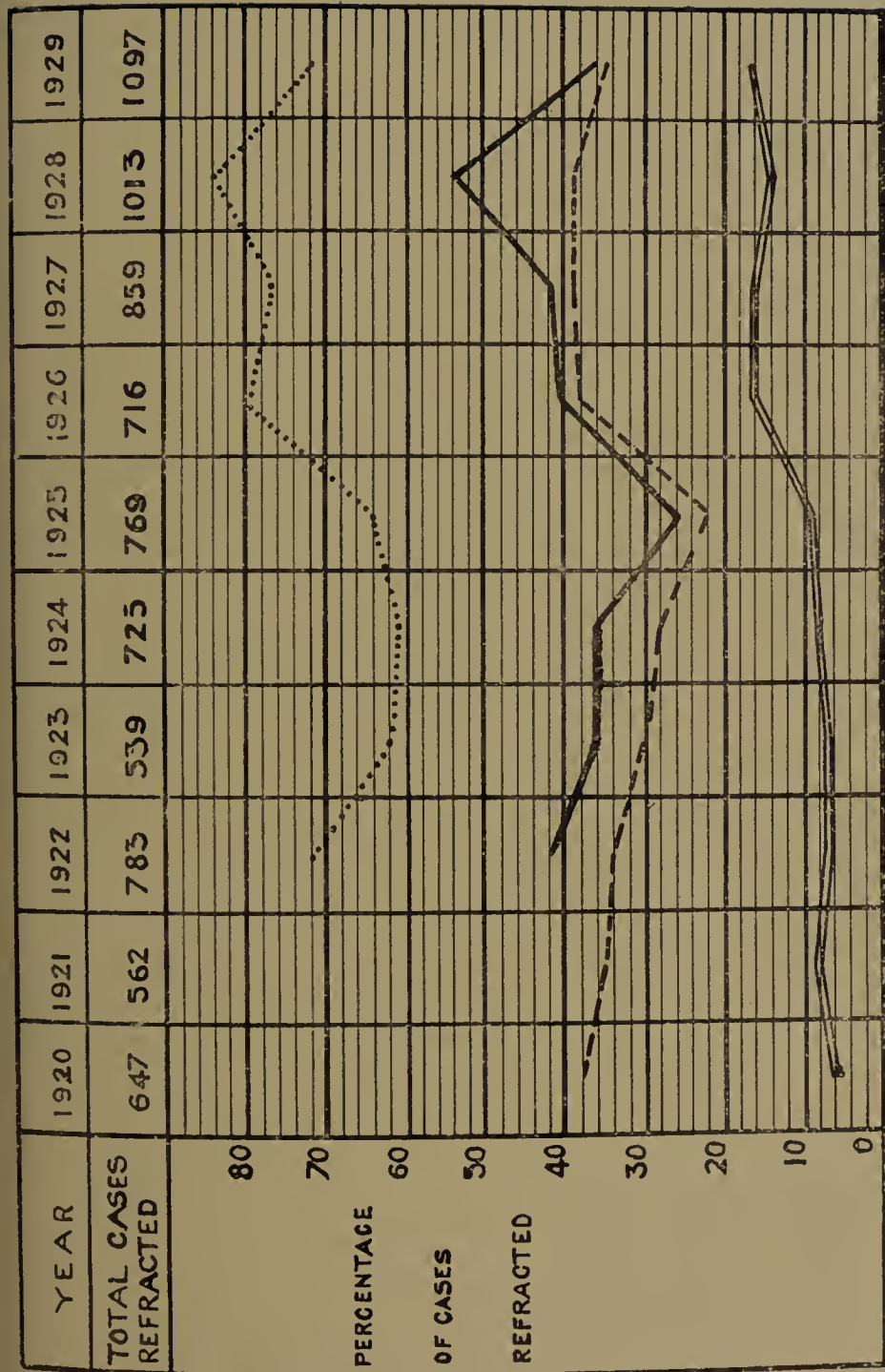
The myopia figures appear under three heads: simple short-sight, myopic astigmatism, and mixed astigmatism. The astigmatic factor is congenital, and is due to the irregular curvature of the cornea. The myopic factor is added by an axial elongation of the eye. It is necessary, in estimating the incidence of short sight, to count all these forms together.

I would emphasise the view that myopia is not merely an optical but a biological abnormality. An eye which commences with three dioptries of hypermetropia and gradually becomes emmetropic has probably stretched one millimetre, and the condition may be essentially the same biologically as that in another eye which has started with emmetropia and has become myopic to the extent of three dioptries, again an elongation of one millimetre. In the former class it is not uncommon to find a 'myopic crescent,' and some of these cases actually pass over to true optical myopia.

I cannot here go into the vexed question of the cause of myopia. I do not believe that use of the eyes has anything to do with it. I constantly find a history of myopia in the forbears, and believe that the true cause is a hereditary weakness in the scleral coat of the eye, which is aggravated by malnutrition and toxic influences of all kinds. I find that not only do I frequently obtain actual evidence of hereditary short-sight, but the final degree of



# AMONG CHILDREN REFRACTED AT THE COVENTRY EYE CLINIC, 1920-1929







short-sight can often be foretold by a study of the myopia of the relations. If, for example, the mother has seven dioptries of myopia, it is probable that her myopic child will reach approximately this figure.

A study of the accompanying graph shews, first : that among elementary school-children seen at the Eye Clinic simple myopia remained stationary at about 9% cent. from 1920 till 1924, when it began to rise, to attain to about 15%. The curve of total myopia fell from 38% in 1920 to 22% in 1925. In 1926 the curve rapidly rose to 38%, where it remained till 1928; 1929 shewed a slight drop to 35%.

Myopia being a progressive disease, older children are more likely to suffer, and the proportion for secondary schools will be correspondingly higher than that for elementary schools. Again, there is little doubt that myopic children are, as a class, far more studious than their fellows and win more scholarships. For these two reasons the proportion of myopes is far higher in the secondary schools than in the elementary. The curves for the secondary scholarship children shew the same characteristics as those which concern the younger children: a fall till the year of the general strike, and then a sudden rise, which was maintained till 1928. The year 1929 again shews a marked improvement.

There can be little doubt that the variation of the curves represents an alteration in general health conditions, *the myopic curve is a nutrition curve*. During the boom period after the war wages were high, and the nutrition of the working-class children was good. The year 1926 began the period of increasing unemployment, with the inevitable result, diminishing comfort in the home, insufficient and improper food for many children.

During the past five years increasing attention has been given to avoiding and curing the amblyopia (bad sight without actual disease) that so frequently accompanies squint. The squinting eye is not used, and gradually, often indeed rapidly, becomes semi-blind. The only cure is to cover up the better eye and force the failing eye to work. It is found that in the majority of cases under ten years old the sight improves till in most cases both eyes have almost equal acuity. In general the child gains one line of the test types each month of occlusion, so that treatment occupies several months. After ten the amblyopia is deeper, and treatment is not so uniformly satisfactory. The results are better

in girls than in boys, because the boys are more sensitive to ridicule and will not wear the eye-cover.”

The following table gives an analysis of the cases seen by Dr. Harrison Butler :—

	ELEMENTARY SCHOOLS		SECONDARY SCHOOL CHILDREN.
	City Cases.	County Children attending City Schools.	
Submitted to Refraction ...	1097	10	43
Glasses prescribed ...	925	8	36
Attendances made ...	1816	21	56
	No.   *Per Cent.	No.   *Per Cent.	No.   *Per Cent.
Myopia ...	149   16·1	1   12·5	13   36·1
Myopic Astigmatism ...	124   13·4	2   25·0	12   33·3
Hypermetropia ...	220   23·8	2   25·0	1   2·8
Hypermetropic Astigmatism	373   40·3	2   25·0	9   25·0
Mixed Astigmatism	59   6·4	1   12·5	1   2·8

\* Of cases examined.

(h) *Ear Disease and Hearing.*

See Table II., page 173.

(i) *Dental Defects.*

See Table IV., Group IV., page 178.

Mr. M. Raeside, Senior School Dentist, gives the following report on the work of the Dental Clinic for the past year :—

“ The arrangements for dental examination and treatment have not undergone any alteration during the year.

The total number of children examined in the schools was 8,854, of whom 1,436 required no treatment, showing a percentage of 16·3.

For the period under review, 4,480 cases were treated and completed; of this number, 3,543 were children of the systematic age groups 6, 7, 8 and 9, the remaining 937 belonging to ‘ other ages ’ or ‘ Specials.’

As in previous years, one of the most disquieting features of school inspection is the vast number of young children entering school with defective teeth. This can no doubt be accounted for, to a great extent, by artificial feeding in infancy and faulty diet

subsequently. Parents should be instructed in the importance of proper diet in babyhood and in early childhood in order that the jaws may be correctly developed and the mouth kept naturally clean. The use of the tooth brush should also be taught young children right from the time when the teeth commence to erupt.

The emergency cases, *i.e.*, 'casuals,' still continue to interfere greatly with the routine work. These cases can hardly be turned away, but there is a great danger of the parents relying upon the casual treatment and of failing to appreciate the importance of early conservative treatment. If treatment were accepted and carried out in the first instance, the majority of teeth extracted at 'casual' sessions would be saved.

It will be observed from the table on page 178 that a greater number of teeth had to be extracted than in previous years. This is due to the fact that the majority of the children were from schools where dental inspection and treatment had never been given, *i.e.*, schools previously in the County before the City boundary extension.

Incidentally, this same factor also accounts for the slight reduction in the number of fillings done, much of the conservative treatment being of long duration owing to extensive decay of the permanent teeth.

As in previous years, children proceeding to the Corley Open-Air School receive treatment before admission. In addition, treatment was also given to 86 children attending Secondary Schools and 39 children under five years of age referred from the Infant Welfare Centre.

The schools visited and the results of dental examination are as follows :—

School.	Total Children Examined	Referred for Treatment.	Actually Treated.	Re- Treated.
Barkers' Butts ...	482	326	130	38
Broad Street ...	283	216	81	59
Broadway ...	147	123	7	13
Centaur Road ...	291	282	277	115
Cheylesmore ...	413	381	190	90
Earlsdon ...	217	201	49	21
Edgewick ...	273	205	121	73
Folly Lane ...	534	495	214	66
Foxford ...	242	172	41	
*Frederick Bird ...	—	—	179	109
Holbrook Lane ...	729	558	237	47
John Gulson ...	340	250	155	110
*Little Heath ...	—	—	70	24
Narrow Lane ...	366	351	211	41
*Paradise ...	—	—	36	8
Radford ...	310	233	157	68
Red Lane ...	260	203	43	16
St. Peter's ...	131	97	56	16
South Street ...	310	296	118	52
Spon Street ...	377	365	173	71
Stoke Council ...	631	465	223	117
Stoke Heath ...	408	376	134	4
Wheatley Street ...	416	393	195	99
Windmill Road ...	331	301	147	3
Allesley C.E. ...	28	27	17	—
All Saints C.E. ...	165	121	65	30
All Soul's R.C. ...	55	41	44	22
Foleshill C.E. ...	119	111	33	—
Longford C.E. ...	30	25	5	—
Sacred Heart R.C. ...	93	85	46	15
*St. Elizabeth's R.C. ...	—	—	10	9
St. John's C.E. ...	159	141	56	18
St. Mark's C.E. ...	132	101	21	11
St. Mary's R.C. ...	120	110	19	14
St. Michael's C.E. ...	208	160	64	26
St. Osburg's R.C. ...	121	108	46	14
Stoke C.E. ...	76	72	16	11
Westwood Heath C.E. ...	27	27	6	—
Wheatley Street Special ...	—	—	1	—
Totals ...	8854	7418	3698	1430

\* No dental inspection during 1929.

(j) *Crippling Defects.*

See Table III., page 176.

The following table gives an analysis of the crippling conditions noted during the year under review, viz. :—

Infantile Paralysis :—				Boys.	Girls.	Totals.
Leg ...	...	...	...	23	10	33
Arm ...	...	...	...	7	2	9
Arm and Leg ...	...	...	...	2	5	7
Trunk and Legs ...	...	...	...	—	1	1

Tuberculosis (arrested) :—				Boys.	Girls.	Totals.
Hip	...	...	...	1	4	5
Spine	...	...	...	1	1	2
Shoulder	...	...	...	—	1	1
Talipes (deformed feet)	...	...	...	10	2	12
Claw feet	...	...	...	1	3	4
Congenital Dislocation of Hip	...	...	...	1	4	5
Cerebral Palsy	...	...	...	3	—	3
Muscular Dystrophy	...	...	...	4	—	4
Erb's Palsy	...	...	...	5	3	8
Congenital Deformity	...	...	...	5	6	11
Cleft Palate	...	...	...	5	13	18
Spinal Curvature :—						
Kyphosis	...	...	...	1	2	3
Scoliosis	...	...	...	3	—	3
Knock Knee	...	...	...	3	5	8
Flat Feet	...	...	...	24	25	49
Wry Neck	...	...	...	3	3	6
Accident	...	...	...	3	4	7
Miscellaneous	...	...	...	2	1	3
" Hearts "	...	...	...	2	2	4
Rickets	...	...	...	—	3	3
Totals				109	100	209

*Cleft Palate.*—A congenital deformity not hitherto included in this table is the condition of Cleft Palate. The treatment of this condition is at present extremely unsatisfactory. Operative treatment is frequently unsuccessful and is carried out at too late a stage for any improvement in speech to follow. Where operative treatment is unsuccessful, the insertion of an obturator with careful after-training in articulation is not practised—no facilities existing in Coventry for the amelioration of speech defects.

The numbers given are not representative of the prevalence of the defect in *all* Coventry school children, but only for those attending 23 out of the 38 elementary schools. If these small numbers are indicative, the condition seems to be three times as common in girls as in boys. Of the girls 5 are marked as incomplete cleft palate and 8 as complete. Of the boys, 2 are partial, one complete, and one has been closed successfully by



operation, but without any consequent benefit to the articulation. Among the 13 girls 6 have had operation with partial success, and 7 have had no operation.

### Nutrition.

The following table shows the percentage and degree of nutrition found during the course of medical inspection.

Age Group		Number of Children Examined	Nutrition Very Good	Per Cent.	Nutrition Good	Per Cent.	Nutrition Bad.	Per Cent.	Nutrition Very Bad	Per Cent.
Entrants.	Boys	1282	244	19.0	900	70.2	138	10.8	..	..
	Girls	1190	390	32.8	725	60.9	75	6.3	..	..
Intermediate.	Boys	1248	191	15.3	909	72.8	148	11.9	..	..
	Girls	1040	358	34.4	604	58.1	78	7.5	..	..
Leavers.	Boys	1070	325	30.4	677	63.3	68	6.3	..	..
	Girls	933	431	46.3	475	50.9	27	2.9	..	..

### Personal History—Previous Illnesses.

The following table shows the percentage of children, in the three age groups inspected, who have suffered from infectious diseases either before attending school or after admission.

#### PREVIOUS ILLNESSES.

Age Group		Number Examined	Mensles	Per Cent	Whooping Cough	Per Cent	Chicken Pox	Per Cent	Scarlet Fever	Per Cent	Diphtheria	Per Cent	Mumps	Per Cent
Entrants.	Boys	1282	946	73.8	554	43.2	345	26.9	52	4.1	26	2.0	170	13.3
	Girls	1190	899	75.6	569	47.8	330	27.7	49	4.1	22	1.9	146	12.3
Intermediate.	Boys	1248	1061	85.0	654	52.4	560	44.9	80	6.4	33	2.6	337	27.0
	Girls	1040	924	88.8	600	57.7	475	45.7	81	7.8	37	3.5	295	28.4
Leavers	Boys	1070	917	85.7	553	51.7	425	39.7	90	8.4	36	3.7	346	32.3
	Girls	933	829	88.8	567	60.7	438	46.9	98	10.5	34	3.6	318	34.0

For the summary of the defects found by medical inspection see Table II. A, page 173.

## 6. Infectious Disease.

All cases of infectious disease coming to the notice of the Head Teachers are required, under Section 39 of the Corporation Act, 1900, to be notified by them to the Medical Officer of Health.

Below will be found a table showing the periods of exclusion which are in force in this City for the respective diseases.

With regard to Diphtheria, all cases and contacts are swabbed by the school nurses, and are not allowed to return to school until two successive negatives in the former case and one in the latter have been obtained. In this connection 641 swabs were taken during the year.

Among the measures directed against Diphtheria was that of immunization by the Schick method, and during the year 1,171 children were so treated, thus:—Frederick Bird School, 177; Narrow Lane School, 276; Folly Lane School, 198; Cheylesmore School, 164; Barkers' Butts School, 356. Details of this work appear in the General Health Report of the City.

It has not been necessary during 1929 to close any school on account of infectious disease.

### INFECTIOUS DISEASES.

Periods of Quarantine for those exposed to Infection and lengths of Isolation of those attacked.

Infectious disease.	Quarantine to be required after last exposure to infection.	Earliest date of return to school after an attack.
Small Pox .. ..	18 days	When all scabs have fallen off.
Chicken Pox .. ..	18 days	" " " " " "
Scarlet Fever .. ..	14 days	Variable, generally 6 or 7 weeks, sometimes longer.
Diphtheria .. ..	12 days	Very variable; may attend school when certified by Medical Officer of Health.
Measles .. ..	16 days	Three weeks.
Whooping Cough .. ..	21 days	When the cough has disappeared.
German Measles .. ..	16 days	About three weeks.
Mumps .. ..	24 days	Four weeks if all the swelling has subsided.
Typhoid Fever .. ..	28 days	Only on medical advice.

NOTE.—In the case of Small Pox, Chicken Pox, Scarlet Fever, Diphtheria, and Typhoid Fever, all children from an infected home are excluded from school.

In the case of Measles, German Measles, and Whooping Cough, children from infected homes are allowed to go to school if they attend Senior Departments and have themselves had the disease.

In the case of Mumps only the affected children are excluded.

The following, since they are combined with Infants' Departments, should follow the rule for the latter:—

Little Heath.

Allesley C.E.

All Souls' R.C.

Longford C.E.

Sacred Heart R.C.

St. Elizabeth's R.C.

St. Mary's R.C.

St. Michael's C.E.

Stoke C.E.

Westwood Heath C.E.

Wheatley St. Special.

The above table is re-inserted for convenience of reference by Head Teachers.

### Vaccination.

During the systematic examination of the elementary school children a note was made concerning their previous vaccination. The results obtained are shown below.

BOYS					GIRLS			
Age Groups			Number Examined	Number Vaccinated	Percentage Vaccinated	Number Examined	Number Vaccinated	Percentage Vaccinated
Entrants	..	..	1282	407	31·0	1190	376	31·6
Intermediate Age	..	..	1248	292	23·4	1040	274	26·3
Leavers	..	..	1070	351	32·8	933	333	35·7
Totals			3600	1050	29·1	3163	983	31·1

### 7. Following up.

In connection with the work of "following up," the table below shows the number of home visits paid by the school nurses :—

Condition.						Visits Paid.
Eyes	..	..	..	..	..	517
Tonsils and Adenoids	..	..	..	..	..	546
Teeth	..	..	..	..	..	331
Ringworm	..	..	..	..	..	72
Diphtheria	..	..	..	..	..	714
Miscellaneous	..	..	..	..	..	302
TOTAL						2482

In addition to the home visits above-mentioned, the nurses made 1,187 visits to schools.

## 8. Medical Treatment.

The points arising under this heading have been already dealt with under heading 5.

## 9. Open-Air Education.

The Education Committee provide two open-air schools. One is of the nature of a playground class, and is held on part of the roof of the Centaur Road School. The other is a residential school at Corley, situated on high ground about five miles from the City. This school accommodates 90 children.

### *Corley Open-Air School.*

Dr. Moir submits the following report :—

“ During 1929 many changes took place in the staff at this School. On May 13th Sister Handsford left, being succeeded on June 10th by Sister Wilkie. On October 1st Sister Wilkie was transferred to the staff of the School Clinic, and was succeeded by Sister Newbrook, who is still at Corley.

The Headmistress, Miss Townsend, died suddenly on August 28th. In September Miss Page took up the duties of the post.

Miss Townsend had been associated with Corley Open-Air School from its inception. She had a vigorous but kindly personality, and will continue to be remembered by many Coventry school children who passed through her hands at Corley.

Changes have also been effected in the building, a covered way has been erected from the dining room to the school and a proper road from the entrance gate to the kitchen has been laid down. A portion of the ground which lies between the dining room and the school has been asphalted, thus providing a suitable playground for the children. A sewing-maid now visits the school twice a week, and the children's laundry is washed at a local laundry instead of, as previously, by the mothers at home.

As in 1928, so during 1929, there was a small epidemic of Scarlet Fever involving 9 children, 3 boys and 6 girls.

At the beginning of the year there were 59 children on the registers, 30 girls and 29 boys. During the year 69 boys and 76 girls were admitted, a total of 145; 69 boys and 78 girls were discharged, altogether 147. Consequently the number of children on the registers on December 31st was 57, 30 boys and 27 girls.

The following table shews the period of attendance of the children admitted and discharged during the year :—

Weeks.				Boys.	Girls.	Total.
0-4	..	..	..	1	7	8
5-8	..	..	..	3	6	9
9-12	..	..	..	1	2	3
12-16	..	..	..	6	5	11
17-20	..	..	..	12	6	18
21-24	..	..	..	9	9	18
25-28	..	..	..	6	7	13
29-32	..	..	..	3	2	5
33-36	..	..	..	1	2	3
49-52	..	..	..	1	—	1
Totals				43	46	89

The illnesses from which these children were suffering on admission are set out below :—

Illness.					Boys.	Girls.	Total.
Bronchitis	..	..	..	..	11	11	22
Malnutrition	..	..	..	..	14	16	30
Rheumatism	..	..	..	..	3	3	6
Chorea	..	..	..	..	8	5	13
Valvular disease of the Heart	..	..	..	..	2	4	6
Pleurisy	..	..	..	..	—	2	2
Dyspepsia	..	..	..	..	3	4	7
Asthma	..	..	..	..	2	1	3
					43	46	89

What is the commonest complaint for which children are admitted to Corley Open-Air School, in other words, what is the commonest complaint among school children? Not rheumatism or tuberculosis, much as is heard of these two diseases because of their high mortality and disability rate; not these, but chronic digestive disturbances, which manifest themselves rather differently in children than in adults. The causes of these digestive disorders are manifold, but ill-balanced meals play a prominent part. Although much is written and spoken to-day on dietetics, the average person remains woefully ignorant of the subject. Of cooking few have anything beyond an elementary knowledge; the cook-shop is too frequently a refuge and advertisements of this and that artificial food have too much sway. Good, plain, ordinary food is what the mothers say they give the children, but one gets many surprises when one enquires into the constituents of this. The Domestic Science Course in the schools should assume greater and greater importance, for the future well-being of the nation rests not a little on what is taught and practised



there. It is a comparatively easy thing to place a joint in an oven to cook but how little is known about the preparation of vegetables! One hears the tale daily, 'She won't eat any green vegetables.' The child won't eat them, certainly not, the mother cannot cook them. The result in the child is constipation, and afterwards symptoms of indigestion—sometimes masked as 'nerves'—arise.

Aiding the effect of ill-chosen meals are lack of sufficient sleep, lack of fresh air, lack of sufficient drinking water, and lack of supervision to establish regular habits.

Corley does its main work in restoring these children to digestive health, a restoration which, although undramatic, is as great as the restoration of movement in a paralysed limb."

#### *Centaur Road Roof School.*

Dr. Moir remarks as follows:—

"The two roof classes at Centaur Road School opened on April 8th, and did not close until December 20th. The experiment of keeping these classes open until the end of December was first tried in 1923, and the practice has been continued without a break since, although the structural alterations considered advisable by the Committee in 1923 have never been carried out. In wet weather the teachers and children work under great discomfort—discomfort not necessarily associated with work under open-air conditions. After slight showers the floors are soon dry, but in really wet weather—much of which has occurred in 1929—the rain drives over the top of the class room screens and into the unprotected part of the dinner shed. When these conditions prevail the class room floor is always wet and often the desks too. Then the uneven nature of the surface of the floor surrounding the dinner shed makes drainage difficult, and often there is but a small part of the shed floor which remains dry.

In a rainy year the progress made by the children is always less. Accordingly, in 1929 the average increase in height for the girls was 1.6 inches, and the average gain in weight 4.15 lbs. Among the boys the figures were 1.6 and 4.23 respectively. The corresponding figures for the previous year, when weather conditions were much more favourable, were for the girls 2.07 inches and 6.56 lbs., and for the boys 2.17 inches and 6.6 lbs. The average age of the girls this year was 9.7 years, of the boys 8.7 years.



It is interesting to compare these gains with those obtained at Corley Open-Air School, which is residential. There the average increase in weight per day among the 89 children who left during 1929 was 0.587 ozs. The Roof School figures compare with this more favourably than one would expect. Here the average increase, if one counts only the 151 days of actual school attendance, a questionable procedure, is 0.447 ozs."

## 10. Physical Training.

The following is the substance of a comprehensive report by Miss E. K. Brown, the Organiser of Physical Training :—

*“ General.*—Physical Training, scientifically applied, is of undoubted value in the educational scheme. It promotes health, which in turn enhances the ability to assimilate knowledge. The teaching of hygiene combines appropriately with the physical training course. The combination is calculated to produce bodily fitness and health conscience—two basic essentials for the future citizen.

Systematic physical training has its place in the curricula of all elementary schools in the City, with special emphasis on the daily short intensive lesson.

There is often failure to realise the virtue of physical education in the training of backward children. Mental dullness is by no means unconnected with physical defect and general lack of tone.

In the infants' schools, during the year under review, corrective and breathing exercises, routine simple games and the like have played a prominent part. The teaching methods have improved, and an active, joyous, stimulating lesson is now the rule. Such matters as the correct use of the handkerchief have been impressed, and experimental work in the handling of balls and ropes has proceeded satisfactorily.

In the junior departments, the children are at an age when they are particularly responsive in the matter of physical training. They can well appreciate the fundamentals of correct posture and general muscular co-ordination. They enter into games with zest, and generally a certain robustness characterises their attitude towards the physical training lesson. All teachers should recognize the value of the stimulating effect of this work taken in the open air.

The syllabus in the senior departments includes more advanced work, though based on the scheme for juniors; it also embraces instruction in swimming and lessons in the principles of hygiene. In certain senior schools, physical training is unfortunately curtailed owing to pressure of other subjects in the curriculum. The importance of correct posture and of active intensive exercises cannot be too strongly stressed for children in this stage of their physical and mental development. Team work is also of the greatest value.

In the re-organised senior schools the scheme of work has been extended to include continuous rhythmic movement and the use of simple gymnastic apparatus under specialist teachers.

*Organised Games.*—In the case of children over seven years of age, one period per week is given over to organised games. The younger children use the school playgrounds, but senior pupils go further afield. For the purpose of providing playing spaces, the Education Committee utilizes eleven recreation grounds and rents five playing fields; a sixth playing field, to cater for the Broad Street area, is shortly to be acquired. Additional games equipment is constantly being provided, but a better system for the marking of pitches is desirable. The spaces available to boys for football and cricket are yet inadequate, although for match play the Sports Clubs in connexion with various works and factories are commendably generous in lending their grounds.

A graded scheme of games is in operation which secures that the amount of skill and energy required is suited to the ages of the participants and that they are prepared for more advanced games after leaving school. This scheme requires from 25 to 45 minutes of actual playing time to be allotted for each lesson.

*Swimming.*—The system of instruction in swimming followed the lines of previous years, land drill in the schools preceding the lessons in the water at the Baths.

The number of classes regularly attending the Baths was 56, (for boys 28, for girls 28). Of these, eleven boys' and eleven girls' classes were taken out of school hours. The total number of lessons given during the season was 1,064, and the number of children who received instruction was 2,178. The fact that the Baths are not reserved for the children has adversely affected the

work in some schools. The need for baths in the Foleshill area has again been greatly felt—six schools having been unable to participate in swimming instruction.

The Baths and Parks Committee, as in previous years, awarded proficiency certificates to the children passing the following tests :—

1st Class.—Boys swim 90 yards in 100 seconds.

Girls swim 60 yards in 70 seconds.

2nd Class.—Boys swim 90 yards breast and 30 yards back stroke.

Girls swim 60 yards breast and 30 yards back stroke.

3rd Class.—Boys and girls swim 30 yards.

The numbers of successful competitors were as under :—

1st Class	...	Boys	11	...	Girls	...	44
2nd Class	...	Boys	84	...	Girls	...	97
3rd Class	...	Boys	265	...	Girls	...	187

During the winter months, children were admitted to the Baths at a reduced rate of 1d. per head per admission once weekly.

In this connexion one or more teachers undertook voluntarily the supervision at each session. It has been observed that the children benefit markedly by the continuation of summer practice which this arrangement enables.

During the year, four lecture-demonstrations were given to teachers by Professor Howcroft, the Olympic Swimming Coach, who commended the standard of diving shown by the demonstration children.

The Inter-Schools Swimming Gala was, as usual, a successful event and the championship shields were won by Frederick Bird Senior Boys and John Gulson Girls.

*Junior Technical Evening Schools.*—There are six junior technical evening schools under the Coventry Education Committee, and in these, 27 physical training classes were held during the year. The syllabus is comprehensive and includes tables of exercises after the Swedish system, folk dancing, skipping, gymnastic games and boxing. Certain of the teachers took the opportunity of discussing health topics and principles of hygiene with the scholars, and a suitable background to the

practical exercises was thus provided. Many pupils were suitably clothed for the work with flexible shoes and light loose garments, but there were too many who exercised in unsuitable attire.

*Technical College Physical Training Classes.*—These afford to adults an opportunity of physical education. One class for women and one for men were held at John Gulson School regularly during the winter and proved exceedingly popular, but the accommodation is limited and need for a properly equipped gymnasium is evident.

*Further Instruction for Teachers.*—Marked changes have taken place in recent years in the scope and method of presentation of the physical training lesson. It is therefore important that the teachers, on whom largely depends the success of the work, should themselves have the opportunity of acquiring these new phases. During the year, four refresher courses for women teachers were held, with an enrolment of 152. Also two attended the Physical Training Holiday Course at Scarborough. Both succeeded in gaining the Diploma, one with distinction.

The Teachers' Physical Training Club continues to meet weekly at Stoke Park Secondary School, and the year under review has seen therein many additional activities.

The Teachers' Swimming Club continued to meet once weekly during the season.

The Local Branch of the English Folk Dance Society continues to hold regular classes which are proving widely popular.

*Coventry Elementary Schools Athletic Association.*—This Association, which is ably controlled by a body of teachers, continues to do good work in promoting enthusiasm for and prowess in games and athletics. Competitions for the various Shields were held during the year, with the following results :—

Rugby Football Shield, won by Broad Street School.

Association Football Shield, won by Foxford School.

Cricket Shield, won by Narrow Lane School.

Net Ball Shield, won by South Street School.

Swimming Shields, won by Frederick Bird Boys and John Gulson Girls.

Walter Brandish Cup, won by John Gulson School.

Godiva Championship Cup, won by Frederick Bird Boys.

Championship Shield, won by Centaur Road Girls.

Tug-of-War Shield, won by John Gulson Boys.

Relay Shields, won by Stoke Council Boys and John Gulson Girls.

In addition to activities in connexion with games, the Association successfully organises a Whitsuntide Camp at Dymchurch, which provides a health-giving holiday for a large number of children annually.

*Other Matters.*—The practice of forming Old Scholars' Associations in direct contact with the day schools is growing, and all are doing good work in providing wholesome recreation and media of expression for their members. The Juvenile Organisations Committee also organises games for juveniles belonging to its constituent bodies.

Six elementary schools have Girl Guide companies, which are officered by the teachers.

The three play centres, under the auspices of the Education Committee, were seen to advantage during the year. They are situate at Broad Street, South Street and Spon Street Schools, and were opened twice each week.

## 11. Provision of Meals.

A few cases of underfeeding, where neither parents nor teachers have applied for school meals, have been met with and reported.

The School Medical Officers have inspected the premises and arrangements during meal times.

The Wheatley Street Special School was again used as a Centre and meals were provided there during the year.

The total number of meals supplied was 1,664; of these, 621 were for children attending elementary schools, and 1,043 for those in attendance at the Wheatley Street Special School. The number of elementary school children receiving meals at any one time varied from 7 to 2.

*Centaur Road Open-Air School.*—During the year, 5,606 meals were supplied; of these, 5,416 were given on payment of 2/- per week, and 190 were supplied free of cost to necessitous cases attending this school.



## 12. School Baths.

The special school for mental defectives is the only elementary school in Coventry provided with a bath. It may be hoped that in time shower baths for children in the elementary schools may be available.

## 13. Co-operation of Parents.

Parents are very welcome at the routine medical inspection of their children. Their presence shows a commendable interest in the work, and, moreover, parents are able to furnish the medical inspector with indispensable information as to the family history, past illnesses and like matters.

Parents' Percentage Attendance.

	Number Examined	Attendances by Parents	Percentage Attendances
Entrants:			
Boys .. .. .	1282	1120	87·4
Girls .. .. .	1190	1039	87·3
Totals ..	2472	2159	87·3
Intermediate Age:			
Boys .. .. .	1248	873	70·0
Girls .. .. .	1040	787	75·7
Totals ..	2288	1660	72·7
Leavers:			
Boys .. .. .	1070	459	42·9
Girls .. .. .	933	537	57·6
Totals ..	2003	996	49·7

## 14. Co-operation of Teachers.

As in previous years, teachers in the various schools have accorded valuable assistance and cordial co-operation to the school medical workers. Their keen interest in matters concerning the health of their charges is highly commendable. They fully recognise that a well child is most receptive of knowledge.

## 15. Co-operation of School Attendance Officers.

During 1929, as in the past, the school attendance officers have proved themselves helpful and eager participants in the school medical scheme. They can be of service in many ways, and they have never been found wanting.



## 16. Co-operation of Voluntary Bodies.

Again we have to record our thanks to the City Aid Society, as they have been very helpful to us, in spite of the fact that we now have our own Open-Air Boarding School for delicate children.

During the year, 31 children have been referred to them for Convalescent Home treatment at the seaside and elsewhere for varying periods.

The help of the National Society for the Prevention of Cruelty to Children is occasionally asked and obtained.

A number of crippled children have been referred to the "Dunsmoor" Orthopædic Clinic, and to the Coventry and Warwickshire Hospital, and the results of the treatment given have been gratifying.

## 17. Blind, Deaf, Defective and Epileptic Children.

See Table III., page 175.

The following table shows the distribution of the children under this heading who are in Institutions :—

Institution	Boys.	Girls.	Total
<b>Totally Blind :—</b>			
Royal Institution for the Blind, Birmingham ..	..	3	3
Gulson Road Hospital .. .. .	..	1	1
<b>Partially Blind :—</b>			
Royal Institute for the Blind, Birmingham ..	1	..	1
Royal Institute for the Blind, Norwood ..	..	1	1
<b>Deaf :—</b>			
Royal Institute for the Deaf and Dumb, Derby..	1	..	1
Royal Institute for the Deaf & Dumb, Birmingham	4	7	11
<b>Epileptics :—</b>			
Lingfield Epileptic Colony .. .. .	2	..	2
The Colony, Chalfont, Bucks .. .. .	..	1	1
<b>Defectives :—</b>			
Roman Catholic Special School, Liverpool ..	1	..	1
<b>Totals</b> ..	9	13	22

Forty children were "notified" during the year to the Mental Deficiency Committee.

## Wheatley Street Special School.

	Boys.	Girls.	Total.
(1) Number of Children who have left the School since 1910 .. .. .	140	128	268
(2) Number who :—			
(a) Have since died .. .. .	5	7	12
(b) Are known to be incapable by reason of mental defect of undertaking employment	10	20	30
(c) Are in attendance at an Institution for further education :—			
(1) Deaf and Dumb School .. .. .	4	1	5
(2) Blind School .. .. .	..	..	..
(3) Private School .. .. .	1	4	5
(d) Are in any other Institution :—			
(1) Asylum .. .. .	3	3	6
(2) Workhouse .. .. .	4	6	10
(3) Epileptic Colony .. .. .	..	..	..
(4) Homes for Mental Defectives ..	15	8	23
(5) Other Institutions .. .. .	2	..	2
(3) Number who are employed in :—			
(a) Industrial or manual work .. .. .	41	13	54
(b) Agricultural or rural work .. .. .	2	1	3
(c) Domestic work .. .. .	..	26	26
(d) Commercial, professional .. .. .	..	..	..
(e) Casual work .. .. .	20	10	30
(4, Number untraced or left the City .. .. .	15	12	27
(5) Returned to Elementary Schools .. .. .	9	9	18
(6) Unemployed .. .. .	4	2	6
(7) Excluded, unable to profit .. .. .	3	4	7
(8) Unable to attend owing to distance .. .. .	1	..	1
(9) Ill health .. .. .	1	2	3

Miss Tuft, the Head Mistress of the Special School, reports as follows on the year's work :—

“ The Special School at Wheatley Street has accommodation for 70 children. At the close of the year there were 75 children on the registers. During the year, 17 children were admitted—9 boys and 8 girls—and 18 left—9 boys and 9 girls.

Children are not now admitted unless they have an intelligence quotient of 50 or over. This arrangement is proving advantageous to the well-being of the school.

It has often been remarked by casual observers, ‘ There seems nothing wrong with some of the children,’ but usually it is those children, who though mentally deficient, and to all appearances normal, that need the greatest care. Such a child may be comparatively quick in attaining profitable knowledge, but equally so learns mischievous and undesirable pursuits.

This type of child has the lowest sense of responsibility and fails to recognise right from wrong. Much time and care is spent in eliminating faulty habits and encouraging right attitudes.

A girl who came to the school five years ago with a character for viciousness and stealing, left during the year. Although for a long time it was thought the schooling would prove in her case unavailing, the patient work has been rewarded and she has been given a clean testimonial.

The curriculum is practically the same as last year. Boot repairing on a small scale has been newly introduced, however, with fair success.

The crop of potatoes this year from the school garden was  $33\frac{1}{2}$  stones, and has been utilised for midday meals, which many of the scholars take advantage of.

The number of free dinners for our own children during the year numbered 1,043, and for poor children attending various elementary schools 621."

## **18. Nursery Schools.**

There are at present no Nursery Schools in the City.

## **19. Secondary Schools.**

With regard to the above, Dr. Moir writes as follows:—

"The Tables of defects found in the medical examination of pupils at the two Girls' Secondary Schools are shown in the Appendix. The only noteworthy feature is the increase in the number of cases of otitis media.

The response to the examination continues to improve steadily, the number of withdrawals in Stoke Park School now being reduced to 10.

The army hut in which the medical examination is conducted at Barr's Hill School is so out of repair it is rarely weather proof. For size and quietness this hut is entirely suitable, but as it is heated by two coke stoves it is very difficult to keep a workable atmosphere in it. In good weather during September—in which month an attempt is always made to conduct the examination—this disadvantage is not felt.

Scholarship children who attend the two Girls' Secondary Schools, if found to have defective eyesight, are referred to the Eye Specialist at the school clinic for treatment. Fee-paying

pupils with a similar defect cannot take advantage of this arrangement. The result is that many of these are able to consult an optician only. These children are considered not poor enough to receive Hospital treatment—though in some cases their parents are less well off than the parents of scholarship children—and they themselves consider they are too poor to afford the fee to see an Eye Specialist privately. It seems desirable to allow these children the free access to the Eye Clinic which is at present available for children attending the elementary schools."

## 20. Continuation Schools.

There are now no Continuation Schools in the City.

## 21. Employment of Children and Young Persons.

Mr. Turner, the Superintendent Attendance Officer, kindly furnishes the following report relating to the year ended December 31st, 1929:—

"In accordance with the terms of the Employment of Children Bye-Laws, it is illegal to employ a child under the age of 12 years, while children between the ages of 12 and 14 years can be employed only after fulfilling certain conditions as to hours of employment and the nature of the occupation. Certain occupations, which are considered detrimental either to the child's health or morals, are prohibited. All children registered for employment have also to obtain a satisfactory medical report from the School Medical Officer.

### Children Employed in Occupations Notifiable under Bye-Laws.

At the end of 1928 the number of employed children registered in accordance with the Bye-Laws was	221
During the year 1929 the number of fresh registrations was	201
	<hr/> 512
The number of children who left employment or attained the age limit (14 years) was	317
	<hr/>
Number of employed children registered on the 31st December, 1929	195
	<hr/>

As in previous years, the majority of these children are engaged in the delivery of goods in connection with the wholesale and retail distributive trades.

In addition to the above, a large number of children are also employed in various occupations during the Bank Holiday Pleasure

Fairs. Such employment has, of course, to be in accordance with the provisions of the Bye-Laws, but owing to the casual nature of the employment a certain amount of difficulty is experienced in enforcing the regulations.

During the year 8 cases of employment in contravention of the Bye-Laws were reported. Action was taken in each case, the employer receiving either a written or personal warning. Such warnings are usually effective, it seldom being found that an employer offends a second time.

### **Street Trading.**

Under the Bye-Laws no boy under 15 and no girl under 16 is permitted to engage in street trading; a boy between 15 and 16 years must obtain a licence, issued by the Local Education Authority, for this purpose.

At the end of 1928 the number of boys registered in this way was three. During 1929 one fresh licence was issued and three surrendered. Thus, at the end of 1929, one boy was licensed for street trading.

It has been found necessary to issue four warnings for offences under the Street Trading Regulations.

### **Licences to Children for Stage Performances.**

The Education Act, 1921, provides that no child shall take part in performances in places of public entertainment unless furnished with a licence issued in accordance with the Special Rules of the Board of Education. The licence is granted by the Local Education Authority in whose area the child lives, and is valid in England and Wales. Three applications have been received during the year on behalf of Coventry children.

It is also the duty of the Local Education Authority to see that the conditions of such licences are observed by licencees visiting the area. The majority of children who visit the City for the purpose of stage performances come in troupes. During the year 10 licensed children visited the City. Visits were paid to the theatres and apartments, and all the conditions of the licences issued under the Entertainment Rules of the Board of Education were duly complied with.

Further supervision was provided by visits to places of amusement. During the year 13 such visits were made.

### **Juvenile Employment.**

The following extracts are taken from the Report of the Juvenile Employment Committee for the year ended 31st July, 1929 :—

#### **Introduction.**

The work of the Juvenile Employment Bureau falls naturally into the following main sections :—

- (a) The securing of suitable employment for juveniles and
- (b) The payment and general supervision of Juvenile Unemployment Insurance Benefit



and your Committee have continued to regard the former as of supreme importance. It is as a result of this that your Committee are able to record the increasing appreciation of the Bureau shown both by employers and by those seeking employment. The number of young persons, many accompanied by their parents, who have visited the Bureau to obtain information and advice again shows an increase over previous years.

### **Juvenile Employment.**

Trade has, on the whole, been better than in the previous twelve months; not only have there been less claimants to Unemployment Insurance Benefit, but those who have received benefit have, in the main, been unemployed for short periods only.

Vacancies are notified to the Bureau by employers in response to canvassing carried out by officers of the Bureau during the month preceding the end of each school term.

The number of vacancies of which the Bureau has been notified exceeds the number of juveniles placed in employment. This is due, to a large extent, to the fact that many employers engage juveniles direct, despite the fact that they may previously have notified the Bureau of the vacancy.

It is felt that much unnecessary trouble would be saved if employers could be persuaded either to refrain from engaging juveniles except through the Bureau, or, if they find this impracticable, to inform the Bureau as soon as possible that the notified vacancy no longer exists.

In connection with the personal canvass of employers the opportunity is taken to obtain information as to the progress of juveniles who have been placed with them by the Bureau.

### **Co-operation with Schools.**

The procedure for co-operation with the Elementary Schools and the Bureau established by the Committee under the old scheme has been continued.

During the year, Head Teachers forwarded confidential report cards in respect of 1,170 boys and 1,209 girls leaving school. An extract from the records of the School Medical Service is entered on these cards and is found extremely useful by the officers of the Bureau when advising as to the suitability or otherwise of a particular occupation.

As in previous years officers of the Bureau have visited the schools and interviewed as many as possible of the leavers with reference to their future employment. It has been found possible to interview approximately 95 per cent. of the children about to leave school this year (the remaining 5 per cent. being absent at the times of the visits) and a leaflet showing the advantages of keeping in touch with the Juvenile Employment Bureau has been handed to each child. This innovation appears to have had a good effect.

In the majority of cases it was found that a situation had been secured before the child left school. In other cases efforts were made to secure situations as soon as possible, but, where this was found impossible, continued attendance at school was recommended. In



this respect it is gratifying to report that the number of children who have availed themselves of this opportunity has increased.

Information is also given of the opportunities available at the Evening Schools, Technical College, School of Art, etc., for obtaining instruction in subjects appertaining to the child's particular occupation, and it is pleasing to note that the number of pupils attending the various Evening Schools is increasing.

Although similar visits are not paid to secondary schools the number of scholars who, on leaving school, have attended the Bureau for information has increased.

### **Apprentices.**

Juveniles have for many years been advised to enter, if possible, into indentured apprenticeships, and the following statement indicates that this advice has been followed:—

	1st Aug., 1921 to 31st July, 1925.		1st Aug., 1925 to 31st July, 1929.
Number of Indentures enrolled	... 459	...	944

(NOTE.—During the whole of these periods indentures for five years' apprenticeships have been accepted for enrolment).

### **Transfer of Juveniles from "Distressed Areas."**

During the year your Committee have, in response to an appeal from the Government, found employment in the motor and electrical trades for a few boys from the "distressed areas." The welfare of these boys has to a large extent been the responsibility of the officers of the Bureau, and lodgings have had to be obtained and inspected. The boys have been put into touch with the Y.M.C.A., and they have very quickly settled down. Reports from their employers show that they are making good progress.

### **Unemployment Insurance.**

The report covers the first complete year's working of the Unemployment Insurance Act, 1927. This Act threw additional administrative duties on the Bureau, but the work has nevertheless proceeded smoothly and satisfactorily.

The number of Unemployment Insurance Books issued during the period from 1st August, 1928, to 31st July, 1929, was 3,508 (1,860 to boys and 1,720 to girls), an increase of 381 over the corresponding period of last year.

These books are exchanged annually at the close of the Insurance Year (at the beginning of July), and form the basis upon which grant is paid by the Ministry of Labour towards the expenses of administration incurred by the Local Education Authority in carrying out the duties of the Scheme relating to Unemployment Insurance. The amount paid in unemployment benefit during the year was £644, a decrease of £253 as compared with last year. The largest amount paid for one individual week was £73 13s. 6d.

A comparison between the number of Unemployment Insurance Books exchanged at the end of the present Insurance year and the previous Insurance year shows that there was an increase of 446 juveniles between the ages of 16 and 18 years in insurable occupations in the City.

**National Health Insurance.**

The work of franking the National Health Insurance Cards of unemployed juveniles has proceeded smoothly.

**Conclusion.**

Viewing the year generally your Committee consider that the work of securing suitable positions for juveniles, which, as they have stated earlier in this report they consider of paramount importance, has been satisfactory and that steady progress has been made.

**22. Miscellaneous.**

During the year, 135 children were examined with regard to fitness for Juvenile Employment, and in addition 105 candidates for scholarships were examined.

Appended are statistical tables required by the Board of Education.

## APPENDIX.

## ELEMENTARY SCHOOLS.

**Table I.—Return of Medical Inspections** (*see note a*)  
**Year ending 31st December, 1929.**

**A.—ROUTINE MEDICAL INSPECTIONS.**

Number of Code Group Inspections (*see note b*).

ENTRANTS .. .. .	2472
INTERMEDIATES .. .. .	2288
LEAVERS .. .. .	2003
TOTAL ..	6763
Number of other Routine Inspections ( <i>see note c</i> ) ..	635

**B.—OTHER INSPECTIONS.**

Number of Special Inspections ( <i>see note d</i> ). .. ..	3303
Number of Re-inspections .. .. ( <i>see note e</i> ). .. ..	4974
TOTAL ..	8277

Notes on Table I. see page 184.

Table II.

A.—Return of Defects found by Medical Inspection in the Year ended  
31st December, 1929.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
	No. of Defects.		No. of Defects.	
	Requiring treatment.	Requiring to be kept under observation but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation but not requiring treatment.
malnutrition .. ..	4	..	6	..
skin diseases (See Table IV., Group V.)	458	291	26	..
Ringworm—Scalp ..	2	..	23	..
Body .. ..	4	1	19	..
Scabies .. ..	25	..	43	..
Impetigo .. ..	26	..	335	..
Other Diseases (Non-Tuberculous)	24	6	15	..
Blepharitis .. ..	55	..	42	..
Conjunctivitis .. ..	11	..	41	..
Keratitis .. ..	..	..	..	..
Corneal Opacities .. ..	1	..	4	..
Defective Vision .. ..	451	169	688	197
Squint .. ..	46	6	16	18
Other Conditions .. ..	4	4	16	4
Defective Hearing .. ..	31	18	21	..
Otitis Media .. ..	48	5	55	..
Other Ear Diseases .. ..	251	3	8	..
Enlarged Tonsils only .. ..	38	86	103	92
Adenoids only .. ..	84	147	53	36
Enlarged Tonsils & Adenoids	452	201	111	69
Other Conditions .. ..	51	10	36	2
Enlarged Cervical Glands (Non-Tuberculous)	5	6	10	..
Defective Speech .. ..	..	8	14	..
Dental Diseases (see note a) ..	1161	..	74	..
(See Table IV., Group IV.)				
Heart Disease—				
Organic .. ..	2	26	1	14
Functional .. ..	..	16	5	..
Anæmia .. ..	3	1	1	..
Bronchitis .. ..	66	116	33	..
Other Non-Tuberculous Diseases	3	5	7	..
Pulmonary—				
Definite .. ..	..	..	..	..
Suspected .. ..	..	..	..	..
Non-Pulmonary—				
Glands .. ..	..	..	1	..
Spine .. ..	..	..	..	1
Hip .. ..	..	1	..	..
Other Bones and Joints	..	1	..	..
Skin .. ..	..	..	..	..
Other Forms .. ..	1	1	2	..
Epilepsy .. ..	3	4	..	12
Chorea .. ..	26	41	5	..
Other Conditions .. ..	..	..	25	..
Rickets .. ..	2	5	6	..
Spinal Curvature .. ..	18	5	8	1
Other Forms .. ..	127	9	60	1
Defects and Diseases ..	75	48	148	8

Notes on Table II. see page 184.

**B.—Number of Individual Children (*see note b*) found at Routine Medical Inspection to require Treatment (excluding Uncleanliness and Dental Diseases).**

Group.	Number of Children.		Percentage of Children found to require Treatment. (see note d).
	Inspected. (see note c).	Found to require Treatment.	
CODE GROUPS:			
Entrants .. .. .	2472	515	20·8
Intermediates .. .. .	2288	538	23·5
Leavers .. .. .	2003	507	25·3
TOTALS ..	6763	1560	23·1
Other Routine Inspections .. .. .	635	149	23·4

Notes on Table II. *see page 184.*

Table III.—Return of all Exceptional Children in the Area (see note a).

	Boys	Girls.	Total.
<b>Blind</b> (see note b).			
(i.) <i>Suitable for training in a School or Class for the totally blind.</i>			
Attending Certified Schools or Classes for the Blind ..	—	3	3
Attending Public Elementary Schools (see note c) ..	—	—	—
At other Institutions .. .. .	—	1	1
At no School or Institution .. .. .	—	—	—
(ii.) <i>Suitable for training in a School or Class for the partially blind.</i>			
Attending Certified Schools or Classes for the Blind ..	1	1	2
Attending Public Elementary Schools (see note c) ..	1	3	4
At other Institutions .. .. .	—	—	—
At no School or Institution .. .. .	—	—	—
<b>Deaf</b> (see note d).			
(i.) <i>Suitable for training in a School or Class for the totally deaf or deaf and dumb.</i>			
Attending Certified Schools or Classes for the Deaf ..	5	7	12
Attending Public Elementary Schools (see note c) ..	—	—	—
At other Institutions .. .. .	—	—	—
At no School or Institution .. .. .	1	2	3
(ii.) <i>Suitable for training in a School or Class for the partially deaf.</i>			
Attending Certified Schools or Classes for the Deaf ..	—	—	—
Attending Public Elementary Schools (see note c) ..	2	2	4
At other Institutions .. .. .	—	—	—
At no School or Institution .. .. .	—	—	—
<b>Mentally Defective.</b>			
<i>Feebleminded</i> (see note e).			
Attending Certified Schools for Mentally Defective Children ..	43	32	75
Attending Public Elementary Schools (see note c) ..	—	—	—
At other Institutions .. .. .	1	—	1
At no School or Institution .. .. .	1	4	5
<i>Notified to the Local Control Authority during the year.</i>			
Feebleminded .. .. .	10	11	21
Imbeciles .. .. .	6	7	13
Idiots .. .. .	3	3	6
<b>Epileptics.</b>			
<i>Suffering from severe epilepsy</i> (see note f).			
Attending Certified Special Schools for Epileptics ..	2	1	3
In Institutions other than Certified Special Schools ..	1	1	2
Attending Public Elementary Schools (see note c) ..	4	5	9
At no School or Institution .. .. .	1	1	2
<i>Suffering from epilepsy which is not severe</i> (see note g).			
Attending Public Elementary Schools (see note c) ..	14	9	23
At no School or Institution .. .. .	—	1	1



	Boys.	Girls.	Total.
<b>Physically Defective.</b>			
<i>Infectious pulmonary and glandular tuberculosis (see note h).</i>			
*At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board .. .. .	1	3	4
At other Institutions .. .. .	—	—	—
At no School or Institution .. .. .	—	—	—
<i>Non-infectious but active pulmonary and glandular tuberculosis (see note h).</i>			
*At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board .. .. .	3	3	6
At Certified Residential Open-Air Schools .. .. .	—	—	—
At Certified Day Open-Air Schools .. .. .	—	—	—
At Public Elementary Schools (see note c) .. .. .	—	—	—
At other Institutions .. .. .	—	—	—
At no School or Institution .. .. .	—	—	—
<i>Delicate Children (see note h).</i>			
At Certified Residential Open-Air Schools .. .. .	30	27	57
At Certified Day Open-Air Schools .. .. .	14	26	40
At Public Elementary Schools (see note c) .. .. .	177	145	322
At other Institutions .. .. .	—	—	—
At no School or Institution .. .. .	9	8	17
<i>Active non-pulmonary tuberculosis (see note h).</i>			
*At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board .. .. .	4	1	5
At Public Elementary Schools (see note c) .. .. .	—	—	—
At other Institutions .. .. .	—	—	—
At no School or Institution .. .. .	—	—	—
<i>Crippled Children (see note h).</i>			
At Certified Hospital Schools .. .. .	2	3	5
At Certified Residential Cripple Schools .. .. .	1	—	1
At Certified Day Cripple Schools .. .. .	—	—	—
At Public Elementary Schools (see note c) .. .. .	98	82	180
At other Institutions .. .. .	2	1	3
At no School or Institution .. .. .	3	3	6

\* 14 Patients in Hertford Hill Sanatorium attended school.

Notes on Table III. see page 185.

**Table IV.—Return of Defects Treated during the Year ended 31st December, 1929** (*see note a*).

**TREATMENT TABLE.**

**GROUP I.—MINOR AILMENTS.**

Disease or Defect.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme ( <i>see note b</i> ).	Otherwise.	Total.
Skin :—			
Ringworm—Scalp .. ..	20	5	25
Ringworm - Body .. ..	12	11	23
Scabies .. ..	60	8	68
Impetigo .. ..	361	..	361
Other Skin Diseases .. ..	17	..	17
Minor Eye Defects .. ..	146	..	146
Minor Ear Defects ( <i>see note c</i> ) ..	254	..	254
Miscellaneous .. ..	35	..	35
Totals ..	905	24	929

**GROUP II.—DEFECTIVE VISION AND SQUINT.**

Defect or Disease.	Number of Defects dealt with.			
	Under the Authority's Scheme ( <i>see note b</i> ).	Submitted to refraction by private practitioner, or at hospital, apart from the Authority's Scheme	Otherwise	Totals
Errors of Refraction (including Squint) ..	925	..	..	925
Other Defect or Disease of the Eyes ..	73	..	..	73
Totals ..	998	..	..	998

Total number of children for whom spectacles were prescribed :—

- (a) Under the Authority's Scheme .. 925  
 (b) Otherwise .. .. —

Total number of children who obtained or received spectacles :—

- (a) Under the Authority's Scheme .. 848 (31 purchased by Education Committee).  
 (b) Otherwise .. .. —

Total cases referred for refraction 1097.

## GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

NUMBER OF DEFECTS.				
Received operative Treatment.			Received other forms of Treatment.	Total number Treated.
Under the Authority's Scheme, in Clinic or Hospital ( <i>see note b</i> ).	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total.		
299	34	333	..	833

## GROUP IV.—DENTAL DEFECTS.

(1) Number of Children who were :—

(a) Inspected by the Dentist :	(b) Found to require treatment	8355
Routine Age Groups.		
Aged 6	1804	(c) Actually treated .. .. 4674
„ 7	2116	(including 937 specials)
„ 8	2600	
„ 9	2334	(d) Re-treated during the year
	8854	as the result of periodical
Specials ( <i>see note d</i> )	937	examination ( <i>see note e</i> )
		1430
Total ..	9791	

(2) Half-days devoted to Inspection .. .. .	82
„ „ Treatment .. .. .	813
	895
(3) Attendances made by children for treatment .. .. .	6640
(4) Fillings, Permanent Teeth .. .. .	3530
„ Temporary Teeth .. .. .	212
	3742
(5) Extractions, Permanent Teeth .. .. .	678
„ Temporary Teeth .. .. .	10642
	11320
(6) Administrations of general anæsthetics for extractions .. .. .	—
(7) Other operations, Permanent Teeth .. .. .	222
„ „ Temporary Teeth .. .. .	9
	231

GROUP V.—UNCLEANLINESS AND VERMINOUS CONDITIONS (*see note f*).

(i.) Average number of visits per school made during the year by the School Nurses .. .. .	9
(ii.) Total number of examinations of children in the Schools by School Nurses .. .. .	14016
(iii.) Number of individual children found unclean .. .. .	2562
(iv.) Number of children cleansed under arrangements made by the Local Education Authority .. .. .	6
(v.) Number of cases in which legal proceedings were taken :—	
(a) Under the Education Act, 1921 .. .. .	Nil
(b) Under School Attendance Byelaws .. .. .	Nil

Notes on Table IV. Groups I. to V., *see page 186.*

## SECONDARY SCHOOLS.

**Table I.—Return of Medical Inspections, Year ending  
31st December, 1929** (*see note a*).

### A.—ROUTINE MEDICAL INSPECTIONS.

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Number of Code Group Inspections ( <i>see note b</i> ).			
ENTRANTS (aged 10 and 11 years)	..	..	88
INTERMEDIATES (aged 12 years)	..	..	122
LEAVERS (aged 13 to 16 years)	..	..	539
			—
TOTAL	..		749
			—
Number of other Routine Inspections ( <i>see note c</i> )			—

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### B.—OTHER INSPECTIONS

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Number of Special Inspections ( <i>see note d</i> )	..	..	223
Number of Re-inspections ( <i>see note e</i> )	..	..	23
			—
TOTAL	..		246
			—

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Notes on Table I. see page 184.

**Table II.—Return of Defects found by Medical Inspection in the Year ended 31st December, 1929.**

DEFECT OR DISEASE		ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
		No. of Defects.		No. of Defects.	
		Requiring treatment.	Requiring to be kept under observation but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation but not requiring treatment.
Malnutrition	.. ..	..	..	..	..
Uncleanliness	.. ..	..	..	..	..
Skin	Ringworm—Scalp..	..	..	..	..
	Body..	1	..	..	..
	Scabies .. ..	..	..	..	..
	Impetigo.. ..	1	..	..	..
	Other Diseases (Non-Tuberculous)	2	..	..	..
Eye	Blepharitis .. ..	6	..	..	..
	Conjunctivitis .. ..	..	..	..	..
	Keratitis .. ..	..	..	..	..
	Corneal Opacities .. ..	..	..	..	..
	Defective Vision .. ..	87	56	..	..
	Squint .. ..	..	..	..	..
	Other Conditions .. ..	1	..	..	..
Ear	Defective Hearing .. ..	1	..	..	..
	Otitis Media .. ..	8	..	..	..
	Other Ear Diseases .. ..	58	..	..	..
Nose and Throat	Enlarged Tonsils only .. ..	..	..	..	..
	Adenoids only .. ..	2	1	..	..
	Enlarged Tonsils & Adenoids .. ..	18	24	..	..
	Other Conditions .. ..	..	1	..	..
Enlarged Cervical Glands (Non-Tuberculous)		..	..	..	..
Defective Speech .. ..		..	..	..	..
Teeth—Dental Diseases ( <i>see note a</i> ) .. ..		173	5	..	..
Heart and Circulation	Heart Disease—Organic .. ..	..	5	..	..
	Functional .. ..	..	3	..	..
	Anæmia .. ..	..	1	..	..
	Bronchitis .. ..	..	2	..	..
Lungs	Other Non-Tuberculous Diseases .. ..	..	..	..	..
	Pulmonary—Definite .. ..	..	..	..	..
Tuberculosis	Suspected .. ..	..	..	..	..
	Non-Pulmonary—Glands .. ..	..	..	..	..
	Spine .. ..	..	..	..	..
	Hip .. ..	..	..	..	..
	Other Bones and Joints .. ..	..	..	..	..
	Skin .. ..	..	..	..	..
	Other Forms .. ..	..	..	..	..
	Epilepsy .. ..	..	..	..	..
	Chorea .. ..	..	1	..	..
Nervous System	Other Conditions .. ..	..	1	..	..
	Rickets .. ..	..	..	..	..
Deformities	Spinal Curvature .. ..	8	1	..	..
	Other Forms .. ..	82	2	..	..
Other Defects and Diseases .. ..		2	5	..	..

Notes on Table II. see page 184.

**B.—Number of individual children (*see note b*) found at Routine Medical Inspection to require Treatment (excluding Uncleanliness and Dental Diseases).**

Group.	Number of Children.		Percentage of Children found to require Treatment (see note d).
	Inspected. (see note c).	Found to require Treatment	
CODE GROUPS :			
Entrants .. .. .	88	29	33.0
Intermediates .. .. .	122	50	40.9
Leavers .. .. .	539	147	27.3
TOTALS ..	749	226	30.2
Other Routine Inspections .. .. .	..	..	..

Notes on Table II. see page 184.

**Table III. —Return of all Exceptional Children in the Area (*see note a*).**

	Boys.	Girls.	Total.
<b>Physically Defective.</b>			
<i>Crippled Children (<i>see note h</i>).</i>			
At Certified Hospital Schools .. .. .	—	—	—
At Certified Residential Cripple Schools .. .. .	—	—	—
At Certified Day Cripple Schools .. .. .	—	—	—
At Secondary Schools <i>see note c</i> ) .. .. .	1	1	2
At other Institutions .. .. .	—	—	—
At no School or Institution .. .. .	—	—	—

Notes on Table III. see page 185



**Table IV.—Return of Defects treated during the Year ended  
31st December, 1929.**

**GROUP I.—MINOR AILMENTS.**

NIL.

**GROUP II.—DEFECTIVE VISION AND SQUINT.**

Defect or Disease.	Number of Defects dealt with.			
	Under the Authority's Scheme. (see note b)	Submitted to refraction by private prac- titioner or at hospital, apart from the Authority's Scheme.	Otherwise	Total.
Errors of Refraction (including Squint) ..	36	..	..	36
Other Defect or Disease of the Eyes	2	..	..	2
Totals ..	38	..	..	38

Total number of children for whom spectacles were prescribed :—

(a) Under the Authority's Scheme .. .. 36  
(b) Otherwise .. .. . —

Total number of children who obtained or received spectacles :—

(a) Under the Authority's Scheme .. .. 35  
(b) Otherwise .. .. . —

Total cases referred for refraction .. .. 43

## GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

NUMBER OF DEFECTS.				
Received Operative Treatment.			Received other forms of Treatment.	Total number Treated.
Under the Authority's Scheme in Clinic or Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total.		
—	—	—	—	—

## GROUP IV.—DENTAL DEFECTS.

(1) Number of children who were :—

(a) Inspected by the Dentist : (b) Found to require treatment 39

Routine Age Groups Nil. (c) Actually treated .. .. 39

Specials (*see note d*) 39 (d) Re-treated (*see note e*) .. —(2) Half-days devoted to Inspection .. .. .. —  
 „ „ Treatment .. .. .. 8

(3) Attendances made by children for treatment .. .. 86

(4) Fillings, Permanent Teeth .. .. 61  
 „ Temporary Teeth .. .. —  
 — 61(5) Extractions, Permanent Teeth .. .. 22  
 „ Temporary Teeth .. .. 10  
 — 32

(6) Administrations of general anaesthetics for extractions .. —

(7) Other operations, Permanent Teeth .. .. 10  
 „ „ Temporary Teeth .. .. —  
 — 10GROUP V.—UNCLEANLINESS AND VERMINOUS CONDITIONS (*see note f*)(i.) Average number of visits per School made during the year  
 by the School Nurses .. .. Nil.(ii.) Total number of examinations of children in the Schools  
 by School Nurses .. .. Nil.

(iii.) Number of individual children found unclean .. Nil.

(iv.) Number of children cleansed under arrangements made by  
 the Local Education Authority .. .. Nil.

(v.) Number of cases in which legal proceedings were taken :—

(a) Under the Education Act, 1921 .. Nil.

(b) Under School Attendance Byelaws .. Nil.

Notes on Table IV., Groups I. to V. see page 186.

## NOTES ON TABLE I.

- (a) The return refers to a complete calendar year.
- (b) This heading relates solely to the routine medical inspection of the three ordinary age groups, *i.e.*, to medical inspection carried out:—
- (i) in compliance with Article 7 of the Consolidated Regulations relating to Special Services—Grant Regulations No. 19;
  - (ii) on the school premises (or at a place specially sanctioned by the Board under Article 44 (h) of the Code);
  - (iii) for the purpose of making a report on each child on the lines of the approved Schedule set out in Circular 582.
- (c) Under this heading are recorded *routine* inspections, if any, of children who do not fall under the three code age-groups, *e.g.*, *routine* inspections of a fourth age-group or of other groups of children, as distinct from those who are individually selected on account of some suspected ill-health for “Special” Inspection.
- (d) A Special Inspection is a medical inspection by the School Medical Officer himself or by one of the Medical Officers on his staff of a child specially selected or referred for such inspection, *i.e.*, not inspected at a routine medical inspection as defined above. Such children may be selected by the Medical Officer during a visit to the School or may be referred to him by the Teachers, School Nurses, Attendance Officers, Parents, or otherwise. It is immaterial for the purpose of this heading whether the children are inspected at the School or at the Inspection Clinic or elsewhere. If a child happens to come before the School Medical Officer for special inspection during a year in which it falls into one of the routine groups, its routine inspection should be entered in Part A. of Table I., and its special inspection in Part B. The inspection to be recorded under the heading of special inspections should be only the first inspection of the child so referred for a particular defect. If a child who has been specially inspected for one defect is subsequently specially inspected for another defect, such subsequent inspection should be recorded as a Special Inspection and not as a Re-inspection.
- (e) Under this heading the medical inspections are entered of children who as the result of a routine or special inspection come up later on for subsequent re-inspection, whether at the School or at the Inspection Clinic. The first inspection in every case is entered as a routine or special inspection as the case may be. Every subsequent inspection of the same defect is entered as a re-inspection.
- Care is taken to see that nothing is included under the head of special inspections or re-inspections except such inspections as are defined above. Attendances for treatment by a Nurse, or for examinations by anyone other than a Doctor on the staff of the School Medical Service, should not be recorded as medical inspections. If however at any such attendance a child is also examined by one of the Authority's Medical Officers, this should be recorded as a special inspection or re-inspection as the case may be, even if treatment is also given; but such attendance may also of course be recorded as an attendance for treatment.

## NOTES ON TABLE II.

- (a) The figures included in this space refer to the findings of the *Medical Officer* and not those resulting from dental inspection in the schools by the School Dentist. The findings of the School Dentist are recorded in Table IV., Group IV.
- (b) No individual child is counted more than once in this part of Table II., *i.e.*, under B, even if it is found to be suffering from more than one defect.
- (c) The figures in this column will of course be the same as those given in Table I. A.
- (d) The figure in this column is the percentage of the figure in column (3) of that in column (2).

## NOTES ON TABLE III.

(a) This Table is a return of all children in the area for whom the Local Education Authority are responsible and who (except in the case of children suffering from epilepsy which is not severe), have been ascertained to be blind, deaf, defective or epileptic within the meaning of Part V. of the Education Act, 1921. It is the statutory duty of every Local Education Authority formally to ascertain all defective children in their area irrespective of the actual provision now made for their instruction in Special Schools. It is assumed that every Authority will have a complete list of such children compiled from returns made continuously during the year and kept constantly up to date. In order to secure uniformity, Authorities are requested to make up this Table from their list of defective children as it stands on the last day of each calendar year.

Children who are living in residential schools in the area but who come from other areas, should not be included in this Table; but children should be included who are living in residential schools outside the area and who are being maintained there by the Authority.

*For the purpose of this Table, no child has been included whose defect has not been ascertained by the School Medical Officer or a medical member of the Authority's staff.*

The definitions of defective children as given in the Act are as follows and must be very carefully borne in mind.

A blind child is a child who is too blind to be able to read the ordinary school books used by children.

A deaf child is a child who is too deaf to be taught in a class of hearing children in an elementary school.

Mentally and Physically Defective children are children who, not being imbecile and not being merely dull and backward, are defective, that is to say, children who by reason of mental or physical defect are incapable of receiving proper benefit from the instruction in the ordinary public elementary schools, but are not incapable by reason of that defect of receiving benefit from instruction in such special classes or schools as under Part V. of the Act may be provided for defective children.

Epileptic children are children who, not being idiots or imbeciles, are unfit by reason of severe epilepsy to attend the ordinary public elementary schools.

(b) For the purpose of this Return the Board require that children who are blind within the meaning of the Act should be divided into two categories, *i.e.*, (1) those who are totally blind or so blind that they can only be appropriately taught in a school or class for totally blind children, and (2) those who though they cannot read ordinary school books, or cannot read them without injury to their eyesight, have such power of vision that they can appropriately be taught in a school or class for the partially blind.

It should be understood that children who are able by means of suitable glasses to read the ordinary school books used by children without fatigue or injury to their vision, are not included in this Table.

(c) It should be understood that none of the children in this Table (except children suffering from epilepsy which is not severe) ordinarily attend public elementary schools. When the heading is retained, it is merely because at present the insufficiency of Special School accommodation makes it impossible to do better for some defective children than to allow them to attend the ordinary school. No space is left for entry of children with infectious pulmonary tuberculosis attending public elementary schools as these children should of course be promptly excluded from such schools.

(d) Children who are deaf within the meaning of the Act are classified for the purpose of this Table as (1) totally deaf or so deaf that they can only be appropriately taught in a school or class for the totally deaf, and (2) partially deaf, *i.e.*, those who can appropriately be taught in a school or class for the partially deaf.

(e) This category includes only those children for whose education and maintenance the Local Education Authority are responsible, and who are



not eligible for notification to the Local Control Authority under the Mental Deficiency Act.

(f) In this part of the Table only those children are included who are epileptic within the meaning of the Act.

For practical purposes the Board are of opinion that children who are subject to attacks of major epilepsy in school should be recorded as "severe" cases and excluded from ordinary public elementary schools.

(g) In this part of the Table is entered the remainder of the epileptic children in the area, *i.e.*, children whose disease is of such a kind as not to unfit them for attendance at an ordinary public elementary school.

(h) The exact classification of physically defective is admittedly a matter of difficulty. Valuable information, however, will be obtained if School Medical Officers will record these defective children as accurately as possible under the selected sub-headings, taking care that *no child is entered under more than one sub-heading*.

#### NOTES ON TABLE IV.

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(a) The Table deals with all defects treated during the year, however they were brought to the Authority's notice, *i.e.*, whether by routine inspection, special inspection, or otherwise, during the year in question or previously.

(b) This heading includes all cases that received treatment under definite arrangements or agreements for treatment made by the Local Education Authority and sanctioned by the Board of Education under Sections 16 and 80 of the Education Act, 1921. Cases which, after being recommended for treatment or advised to obtain it, actually received treatment by private practitioners, or by means of direct application to Hospitals, or by the use of hospital tickets supplied by private persons, etc., are entered under other headings.

(c) If any treatment is given for more serious diseases of the ear (*e.g.*, operative treatment in hospital) it should not be recorded here but in the body of the School Medical Officer's Annual Report.

(d) The heading "Specials" in this Table relates to all children inspected by the School Dentist otherwise than in the course of the routine inspection of children in one of the age groups covered by the Authority's approved scheme, namely, to children specially selected by him, or referred by Medical Officers, Parents, Teachers, etc., on account of urgency. The number inspected in each age group is separately shown, as well as the total, but under "Specials" only the total number is given.

(e) It should be understood that all the cases entered under this head are also entered under head (c).

(f) A statement as to the arrangements made by the Local Education Authority for cleansing verminous children and a record of the cases in which legal proceedings were taken, is included in the body of the School Medical Officer's Report.

N.B.—Groups I.—V. above cover all the defects for which treatment is normally provided as part of the School Medical Service. Particulars as to the measures adopted by the Authority for providing treatment for other types of defect (*e.g.*, for orthopaedic treatment) or for securing improvement in types of defect which do not fail to be treated under the Authority's own scheme and for which the Authority neither incur expenditure nor accept any responsibility, together with a statement of the effect of the measures taken, is included in the body of the School Medical Officer's Report. It is convenient for such particulars to follow the headings of Table II.

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